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| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7 Chapter 11          |
|   | Chapter 12 Chapter 13         |

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself                        |                            |   |
|--|----------------------------|---|
|  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name                                   | Antonio                    |   |
|  | First name                 | First name                                    |
| Write the name that is on your government-issued |                            |   |
| picture identification (for                      | Middle name                | Middle name                                   |
| example, your driver's license or passport       | Belk                       | Took warms                                    |
| i i  | Last name                  | Last name                                     |
| Bring your picture identification to your        | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| meeting with the trustee.                        | Garrix (Gr., Gr., II, III) | Ganix (Gr., Gr., II, III)                     |
| 2. All other names you                           |                            |   |
| have used in the last                            | First name                 | First name                                    |
| 8 years  |                            |   |
| Include your married or                          | Middle name                | Middle name                                   |
| maiden names.                                    | Last name                  | Last name                                     |
|  | Lastriaine                 | Last name                                     |
|  | First name                 | First name                                    |
|  |                            |   |
|  | Middle name                | Middle name                                   |
|  |                            |   |
|  | Last name                  | Last name                                     |
| 3. Only the last 4 digits                        | XXX - XX- 7857             | xxx - xx-                                     |
| of your Social<br>Security number or             |                            | <del></del>                                   |
| federal Individual                               | OR                         | OR  |
| Taxpayer Identification number                   | 9 xx - xx-                 | 9 xx - xx-                                    |
| (ITIN)   |                            |   |

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| D  | ebtor 1 Antonio<br>First Name                          | Middle Name Last Name  | Case number (if known)   |
|----|--|--|--|
|    | Thor wante   | Wilder Harre East Harre  |  |
|    |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name  | Business name  |
|    | 8 years  | Business name  | Business name  |
|    | Include trade names and doing business as names        | EIN  | EIN  |
|    |  | EIN  | EIN  |
| 5. | Where you live   |  | If Debtor 2 lives at a different address:  |
|    |  | 5526 W 63rd Pl<br>Number Street  | Number Street  |
|    |  | Chicago Illinois 60638   |  |
|    |  | City State Zip Code Cook   | City State Zip Code  |
|    |  | County   | County   |
|    |  | If your mailing address is different from the one  | If Debtor 2's mailing address is different from yours,   |
|    |  | above, fill it in here. Note that the court will send any  | fill it in here. Note that the court will send any notices to  |
|    |  | notices to you at this mailing address.  | this mailing address.  |
|    |  |  |  |
|    |  | Number Street  | Number Street  |
|    |  | City State Zip Code  | City State Zip Code  |
| _  |  | City State Zip Code  | City State Zip Code  |
| 6. | Why you are choosing this district                     | Check one:   | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |
|    |  |  |  |

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| Debtor 1 Antonio   |   |   |  |  | Case number (if kno   | wn)   |
|--|---|---|--|--|---|---|
| First Name   |   | Middle Nam  | e La   | st Name  |   |   |
| Part 2: Tell the   | Court Abo                               | ut Your Bankrup   | tcy Case   |  |   |   |
| 7. The chapter of Bankruptcy Chare choosing under  | ode you                                 |   |  | of each, see <i>Notice Requ</i> es to the top of page 1 and  |   | C. § 342(b) for Individuals Filing for opriate box.   |
| 8. How you will fee  | pay the                                 | more details a cashier's chear may pay with  I need to pay Individuals to the official poyou choose the | about how you rick, or money ord<br>a credit card or<br>the fee in insta<br>Pay Your Filing<br>t my fee be wai<br>ut is not required<br>everty line that a | may pay. Typically, if you cher. If your attorney is so check with a pre-printe allments. If you choose a Fee in Installments (O ived (You may requested to, waive your fee, an pplies to your family simust fill out the Application. | ou are paying the submitting your led address. this option, sig official Form 103 this option only d may do so onling and you are u | the clerk's office in your local court for a fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed<br>bankruptcy w<br>last 8 years?   |   | ✓ No.  Yes. District  District  |  | When<br>When<br>When   | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY  | Case number  Case number  Case number   |
| 10. Are any bank cases pendin being filed by spouse who i filing this cas you, or by a b partner, or by affiliate? | g or<br>a<br>s not<br>e with<br>usiness | ✓ No.  Yes. Debtor  District  Debtor  District  |  | <u>W</u> hen<br><u>W</u> hen   | MM / DD / YYYY  | Relationship to you  Case number, if known  Relationship to you  Case number, if known  |
| 11. Do you rent y<br>residence?  | our                                     | ✓ No.   | landlord obtained<br>Go to line 12.  |  |   | of You (Form 101A) and file it with   |

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Debtor 1 Antonio Belk Case number (if known) Middle Name Last Name First Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Antonio Belk Case number (if known)

#### First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. The law requires that Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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| Debtor 1 Antonio  |  |  | Case number (if known)  |   |
|---|--|--|---|---|
| Part 6: Answer These Que  | Middle Name estions for Reporting Purposes   | Last Name  |   |   |
| 16. What kind of debts do you have?   | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily money for a business or in No. Go to line 16c. Yes. Go to line 17.  16c. State the type of debts you | consumer debts? Consider the consumer debts? Consider the consider the consumer debts? Business debts? Busines the consumer through the consumer through the consumer debts?   | family, or household p<br>ess debts are debts that<br>e operation of the busin  | ourpose."  It you incurred to obtain ness or investment.  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that for No.   |  |   | is excluded and administrative<br>ditors?   |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,00  |   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001   | \$50 million  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion  |
| 20. How much do you<br>estimate your<br>liabilities to be?  | □ \$0-\$50,000<br>□ \$50,001-\$100,000<br>☑ \$100,001-\$500,000<br>□ \$500,001-\$1 million   | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001   | \$50 million  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion  |
| Part 7: Sign Below  |  |  |   |   |
| For you   | of title 11, United States Code.<br>under Chapter 7.<br>If no attorney represents me and<br>out this document, I have obtain<br>I request relief in accordance with<br>I understand making a false state.                            | napter 7, I am aware that<br>I understand the relief and<br>I did not pay or agree the<br>ned and read the notice in<br>ith the chapter of title 11<br>tement, concealing prop | I may proceed, if eligibly vailable under each chase or pay someone who is required by 11 U.S.C. § , United States Code, serty, or obtaining mone | le, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b). specified in this petition. ey or property by fraud in |
|   | connection with a bankruptcy of both. 18 U.S.C. §§ 152, 1341, 152 /s/ Antonio Belk   |  | o to \$250,000, or impri  | sonment for up to 20 years, or  |
|   | Signature of Debtor 1  |  | Signature of Debtor   | 2   |
|   | Executed on 4/2/2018 MM / DE   | D / YYYY   | Executed on   | MM / DD / YYYY  |

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| Debtor 1 Antonio                                 |  | Belk                  | Case number (if)             | known)  |  |  |  |  |
|--|--|-----------------------|------------------------------|---|--|--|--|--|
| First Name                                       | Middle Name  | Last Name             |                              |   |  |  |  |  |
| For your attorney, if you are represented by one | eligibility to proceed un  | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>d States Code, and have explained the<br>lso certify that I have delivered to the |  |  |  |  |
| If you are not                                   | debtor(s) the notice requ  | uired by 11 U.S.C. §  | 342(b) and, in a case in v   | which § 707(b)(4)(D) applies, certify that I  |  |  |  |  |
| represented by an                                | have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. |                       |                              |   |  |  |  |  |
| attorney, you do not                             | •  | , ,                   |                              | •   |  |  |  |  |
| need to file this page.                          | /s/ Alexander Prebe  | r                     | Date                         | 4/2/2018  |  |  |  |  |
|  | Signature of Attorney  |                       |                              | M / DD / YYYY   |  |  |  |  |
|  | ,  |                       |                              |   |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  | Alexander Preber   |                       |                              |   |  |  |  |  |
|  | Printed name   |                       |                              |   |  |  |  |  |
|  | Semrad Law Firm  |                       |                              |   |  |  |  |  |
|  | Firm name  |                       |                              |   |  |  |  |  |
|  | 11101 S. Western Ave   | enue                  |                              |   |  |  |  |  |
|  | Street   |                       |                              |   |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  | Chicago  |                       | Illinois                     | 60643   |  |  |  |  |
|  | City   |                       | State                        | Zip Code  |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  | Contact phone  | 3122374979            | Email address                | apreber@semradlaw.com   |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  |  |                       |                              |   |  |  |  |  |
|  | Bar number   |                       | State                        |   |  |  |  |  |

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| Fill in this infor        | mation to identify your c | ase:        |                      |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1                  | Antonio                   |             | Belk                 |
|                           | First Name                | Middle Name | Last Name            |
| Debtor 2                  |                           |             |                      |
| (Spouse, if filing)       | First Name                | Middle Name | Last Name            |
| United States E           | Bankruptcy Court for the: | Northern    | District of Illinois |
|                           |                           |             | (State)              |
| Case number<br>(If known) |                           |             |                      |

| П | Check if this is an |
|---|---------------------|
| _ | amended filing      |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets<br>Value of what you own |
|--|--------------------------------------|
| 1. Schedule A/B: Property (Official Form 106A/B)   | \$244,463.00                         |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | Ψ244,403.00                          |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$15,605.00                          |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$260,068.00                         |
| Part 2: Summarize Your Liabilities   |                                      |
|  | Your liabilities<br>Amount you owe   |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                  | \$314,216.00                         |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D |                                      |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00                               |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     | -                                    |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$31,994.18                          |
| Your total liabilities   | \$346,210.18                         |
| Part 3: Summarize Your Income and Expenses   |                                      |
|  | 4                                    |
| 4. Schedule I: Your Income (Official Form 106I)  | \$3,823.73                           |
| . Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I       |                                      |
| Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I         | \$3,816.00                           |

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| Deb         | otor 1 Antonio   |  | Belk   | Case number (if known)                      |            |  |  |  |  |  |  |
|-------------|--|--|--|---|------------|--|--|--|--|--|--|
|             | First Name   | Middle Name  | Last Name  |   |            |  |  |  |  |  |  |
| Part        | 4: Answer These Ques   | tions for Administrat  | tive and Statistical Recor                             | 'ds   |            |  |  |  |  |  |  |
| 6. <b>A</b> | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  |  |  |   |            |  |  |  |  |  |  |
| Г           | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |  |  |   |            |  |  |  |  |  |  |
| <br>        | ✓ Yes.   |  |  |   |            |  |  |  |  |  |  |
| L           | ▼  |  |  |   |            |  |  |  |  |  |  |
| 7. <b>V</b> | Vhat kind of debt do you hav   | /e?  |  |   |            |  |  |  |  |  |  |
| [           |  |  |  | by an individual primarily for a personal,  |            |  |  |  |  |  |  |
| _           | tamily, or household purp  | ose. 11 U.S.C. § 101(8). I   | Fill out lines 8-10 for statistical p                  | purposes. 28 U.S.C. § 159.                  |            |  |  |  |  |  |  |
|             | Your debts are not prime this form to the court with   |  | ou have nothing to report on th                        | nis part of the form. Check this box and su | bmit       |  |  |  |  |  |  |
|             |  |  |  |   |            |  |  |  |  |  |  |
|             | From the Statement of Your<br>Form 122A-1 Line 11; <b>OR</b> , Fo  |  | ne: Copy your total current mon<br>orm 122C-1 Line 14. | nthly income from Official                  | \$7,321.99 |  |  |  |  |  |  |
| 9.          | Capy the following energial  | actorories of alaims for   | om Bort 4 line 6 of Schodule                           | E/E.  |            |  |  |  |  |  |  |
| Э.          | Copy the following special   | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: |  |   |            |  |  |  |  |  |  |
|             | From Part 4 on Schedule E  | :/F, copy the following:   |  | Total claim                                 |            |  |  |  |  |  |  |
|             | 9a. Domestic support obliga  | tions (Copy line 6a.)  |  | \$0.00                                      |            |  |  |  |  |  |  |
|             |  | , , ,  |  | \$0.00                                      |            |  |  |  |  |  |  |
|             | 9b. Taxes and certain other of   | lebts you owe the govern   | ment. (Copy line 6b.)                                  | \$0.00                                      |            |  |  |  |  |  |  |
|             |  |  |  |   |            |  |  |  |  |  |  |
|             | 9d. Student loans. (Copy line  | e 6f.)   |  | \$1,964.00                                  |            |  |  |  |  |  |  |
|             | 9e. Obligations arising out of a separation agreement or divo  |  | or divorce that you did not repo                       | ort as \$0.00                               |            |  |  |  |  |  |  |
|             |  | priority claims. (Copy line 6g.)   |  |   |            |  |  |  |  |  |  |
|             | 9f Debts to pension or profi   | t-sharing plans, and other   | r similar debts. (Copy line 6h.)                       | \$0.00                                      |            |  |  |  |  |  |  |
|             | or. Dobte to pension of profit   | . Sharing plans, and other   | Similar debts. (Oopy line on.)                         |   |            |  |  |  |  |  |  |

\$1,964.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | information to identify your c  | ase:   |                                |   |            |   |  |
|--|---|--|--------------------------------|---|------------|---|--|
| Debtor 1                               | Antonio   |  |                                | Belk  |            |   |  |
| Debtor 2                               | First Name  | Middle Na  | ame                            | Last Name   |            |   |  |
| (Spouse, if fi                         | ling) First Name  | Middle Na  | ame                            | Last Name   |            |   |  |
| United Sta                             | ates Bankruptcy Court for the:  | Northern   |                                | District of Illinois  |            |   |  |
| Case num                               | nber  |  |                                | (State)   |            |   |  |
| Officia                                | al Form 106A/B  |  |                                |   | _          |   | Check if this is an amended filing   |
| Sche                                   | dule A/B: Prope   | rty  |                                |   |            |   | 12/1   |
| category v<br>responsibl<br>write your | where you think it fits best. I<br>le for supplying correct infor<br>name and case number (if k | Be as complete ar<br>mation. If more sp<br>known). Answer ev | nd accu<br>pace is<br>very que | set only once. If an asset fits in m<br>rate as possible. If two married pe<br>needed, attach a separate sheet t<br>estion.<br>Other Real Estate You Own or | ople are   | e filing together, both a<br>orm. On the top of any a                   | re equally   |
| 1. Do you                              | ı own or have any legal or ed   | quitable interest i  | n any re                       | esidence, building, land, or similar  | propert    | y?  |  |
|  | No. Go to Part 2  |  |                                |   |            |   |  |
| 1.1                                    | Yes. Where is the property?  Street address, if available, or                                   | other description  | <b>✓</b> Sin                   | s the property? Check all that apply  |            | the amount of any secu  | claims or exemptions. Put<br>red claims on <i>Schedule D:</i><br>ims Secured by Property.  |
|  | 5526 W 63rd Pl<br>Number Street   |  | ☐ c∘                           | plex or multi-unit building<br>ndominium or cooperative<br>anufactured or mobile home   |            | Current value of the entire property? \$244463.00                       | Current value of the portion you own? \$244463.00  |
|  | Chicago Illinois City State  Cook County  | 60638<br>Zip Code  | Tin                            | nd<br>vestment property<br>neshare<br>her   |            | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by  |
|  | ,   |  | ₩ho h                          | as an interest in the property? Ch  | eck        | Check if this is co   | mmunity property   |
|  |   |  | one.                           | btor 1 only   |            | _   |  |
|  |   |  |                                | btor 2 only   |            |   |  |
|  |   |  |                                | btor 1 and Debtor 2 only  |            |   |  |
|  |   |  |                                | least one of the debtors and another  |            |   |  |
|  |   |  |                                | information you wish to add about<br>ty identification<br>er:   | t this ite | m, such as local  |  |
| If you                                 | own or have more than one, li   | st here:   | \4/l + :                       | a the a company of the selection of the set are of the  |            | Do not deduct conved  | alainea au accompationa Dut  |
| 1.2                                    | Street address, if available, or  | other description  | Sin                            | s the property? Check all that apply<br>gle-family home<br>plex or multi-unit building  | -          | the amount of any secu  | claims or exemptions. Put red claims on <i>Schedule D:</i> ims <i>Secured by Property.</i> |
|  |   |  | ☐ Co                           | ndominium or cooperative anufactured or mobile home   |            | Current value of the entire property?                                   | Current value of the portion you own?  |
|  | Number Street   |  |                                | vestment property   |            | Describe the nature o interest (such as fee s                           |  |
|  | City State  | Zip Code   |                                | neshare<br>her  |            | the entireties, or a life   | e estate), if known.   |
|  |   |  |                                | as an interest in the property? Ch  | eck        | Check if this is co   | mmunity property   |
|  |   |  | one.                           | btor 1 only   |            | ш   |  |
|  |   |  |                                | btor 2 only   |            |   |  |
|  |   |  | De                             | btor 1 and Debtor 2 only  |            |   |  |
|  |   |  | At                             | least one of the debtors and another  |            |   |  |
|  |   |  |                                | information you wish to add about   | t this ite | m, such as local  |  |

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| Debtor              | 1 Antonio<br>First Name                                  | Middle Name                               | Belk<br>Last Name  | Case number       | (if known)  |   |
|---------------------|--|---|--|-------------------|---|---|
| 1.3 <u>S</u> t      | reet address, if available, or o                         |   | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply.            | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own? |
| Ni<br>Ci            | umber Street   | Zip Code                                  | Land Investment property Timeshare Other   | _                 | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by  |
|                     |  |   | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an                | other             | (see instructions)  | ommunity property   |
|                     | ld the dollar value of the ponave attached for Part 1. W | ortion you own for<br>rite that number h  |  | uding any entries | s for pages   | 14463.00  |
| you own<br>3. Cars, |  | equitable interes<br>you lease a vehicle, | t in any vehicles, whether they are also report it on Schedule G: Executo rcycles  | -                 | •   |   |
| 3.1                 | 1 Make<br>Model:<br>Year:                                | Toyota<br>Corrolla<br>2009                | Who has an interest in the propone.  Debtor 1 only   | perty? Check      | the amount of any sec   | I claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>laims Secured by Property.                        |
|                     | Approximate mileage: Other information:                  | 110000                                    | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)                             |                   | Current value of the entire property?<br>\$2800.00                      | Current value of the portion you own?<br>\$2800.00  |
| 3.2                 | 2 Make<br>Model:<br>Year:                                | Cadillac<br>SRX<br>2005                   | Who has an interest in the propone.  Debtor 1 only   | perty? Check      | the amount of any sec   | I claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>laims Secured by Property.                        |
|                     | Approximate mileage: Other information: Needs new Engine | 130000                                    | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an  |                   | Current value of the entire property?<br>\$500.00                       | Current value of the portion you own?<br>\$500.00   |
|                     |  |   | Check if this is community instructions)   | property (see     |   |   |

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| Debtor 1 | Antonio   |                      | Belk  | Case number        | er (if known)                                    |   |
|----------|---|----------------------|---|--------------------|--|---|
|          | First Name                                      | Middle Name          | Last Name   |                    |  |   |
| 3.3      | Make<br>Model:<br>Year:                         |                      | Who has an interest in the pone.  Debtor 1 only                     | roperty? Check     | the amount of any secu                           | claims or exemptions. Put ired claims on <i>Schedule D:</i> hims Secured by Property.                       |
|          | Approximate mileage: Other information:         |                      | Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors | •                  | Current value of the entire property?            | Current value of the portion you own? \$0.00  |
|          |   |                      | Check if this is commun instructions)                               | ity property (see  |  |   |
| 3.4      | Make<br>Model:<br>Year:<br>Approximate mileage: | Jeep<br>Cherokee     | Who has an interest in the pone.  Debtor 1 only                     | property? Check    | the amount of any secu                           | claims or exemptions. Put ared claims on <i>Schedule D:</i> sims Secured by Property.  Current value of the |
|          | Other information:                              |                      | Debtor 2 only   | i                  | entire property?                                 | portion you own?  |
|          | Other imormation.                               | the information.     | Debtor 1 and Debtor 2 on  | •                  | \$8000.00  | \$8000.00   |
|          |   |                      | At least one of the debtors   | and another        |  |   |
|          |   |                      | Check if this is commun instructions)                               | ity property (see  |  |   |
| 4.1      | No<br>Yes<br>Make                               |                      | Who has an interest in the p  | wonerty? Chack     | Do not deduct secured                            | claims or exemptions. Put   |
| 4.1      | Model:<br>Year:                                 |                      | one.  Debtor 1 only   | roperty: Check     | the amount of any secu                           | red claims on Schedule D:<br>nims Secured by Property.  |
|          | Approximate mileage:                            |                      | Debtor 2 only   |                    | Current value of the                             | Current value of the  |
|          | Other information:                              |                      | Debtor 1 and Debtor 2 on At least one of the debtors                | •                  | entire property?                                 | portion you own?  |
|          |   |                      | Check if this is commun instructions)                               |                    |  |   |
| 4.2      | Make<br>Model:<br>Year:<br>Approximate mileage: |                      | Who has an interest in the pone.                                    | property? Check    | the amount of any secu<br>Creditors Who Have Cla | claims or exemptions. Put red claims on <i>Schedule D:</i> ims <i>Secured by Property.</i>                  |
|          |   | -                    | Debtor 2 only   |                    | Current value of the                             | Current value of the  |
|          | Other information:                              |                      | Debtor 1 and Debtor 2 on  | •                  | entire property?                                 | portion you own?  |
|          |   |                      | At least one of the debtors   | and another        |  |   |
|          |   |                      | Check if this is commun instructions)                               | ity property (see  |  |   |
|          |   |                      |   |                    |  |   |
| 5. Add   | I the dollar value of the po                    | rtion you own for al | I of your entries from Part 2, in                                   | cluding any entrie | s for pages                                      | 1300.00   |

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Debtor 1 Antonio Belk Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Household Goods \$1500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used Mobile \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... Glock 9 \$100.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Ring \$1000.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4300.00 for Part 3. Write that number here ......

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Belk Debtor 1 Antonio Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$5.00 Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Citi \$0.00 17.4. Savings account: Chase \$0.00 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Debt | tor 1 Antonio   |  | Belk                       | Case number (if known)                      |  |  |  |
|------|---|--|----------------------------|---|--|--|--|
|      | First Name  | Middle Name  | Last Name                  |   |  |  |  |
| 20.  | <ol> <li>Government and corporate bonds and other negotiable and non-negotiable instruments</li> <li>Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.</li> <li>Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.</li> </ol> |  |                            |   |  |  |  |
|      | ✓ No  Yes. Give specific information about them   | Issuer name:   |                            |   |  |  |  |
|      |   |  |                            |   |  |  |  |
| 21.  | Retirement or pension<br>Examples: Interests in If  |  | ), thrift savings accounts | s, or other pension or profit-sharing plans |  |  |  |
|      | <b>✓</b> No   | Type of account:   | Institution name:          |   |  |  |  |
|      | Yes. List each account  | 401(k) or similar plan:  | institution name.          |   |  |  |  |
|      | separately.   | Pension plan:  |                            |   |  |  |  |
|      |   | IRA:   |                            |   |  |  |  |
|      |   | Retirement account:  |                            |   |  |  |  |
|      |   | Keogh:   |                            |   |  |  |  |
|      |   | Additional account:  |                            |   |  |  |  |
|      |   | Additional account:  |                            |   |  |  |  |
| 22.  |   | prepayments<br>d deposits you have made so that<br>with landlords, prepaid rent, publi |                            |   |  |  |  |
|      | Yes   | Electric:  |                            |   |  |  |  |
|      |   | Gas:   |                            |   |  |  |  |
|      |   | Heating oil:   |                            |   |  |  |  |
|      |   | Security deposit on rental unit:   |                            |   |  |  |  |
|      |   | Prepaid rent:  |                            |   |  |  |  |
|      |   | Telephone:   |                            |   |  |  |  |
|      |   | Water:   |                            |   |  |  |  |
|      |   | Rented furniture:  |                            |   |  |  |  |
|      |   | Other:   |                            |   |  |  |  |
| 23.  | Annuities (A contract fo  | or a periodic payment of money to  | you, either for life or fo | r a number of years)                        |  |  |  |
|      | ✓ No ☐ Yes  | Issuer name and description:   |                            |   |  |  |  |
|      |   |  |                            |   |  |  |  |
|      |   |  |                            |   |  |  |  |
|      |   |  |                            |   |  |  |  |

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| Debte | or 1 Antonio   | Belk   | Case number (if known)  |   |
|-------|--|--|---|---|
| 0.4   |  | e Name Last Name   |   |   |
| 24.   | 26 U.S.C. §§ 530(b)(1), 529A(b), and 52  | ccount in a qualified ABLE program, or unde<br>9(b)(1).                                      | er a qualified state tuition program.   |   |
|       | No Institution name and description of the last transfer of the last tra | ription. Separately file the records of any interes  | sts.11 U.S.C. § 521(c):   |   |
|       |  |  |   |   |
| 25.   | Trusts. equitable or future interests in   | property (other than anything listed in line   | e 1), and rights or powers  |   |
|       | exercisable for your benefit   |  | , ,   |   |
|       | Yes. Describe  |  |   |   |
| 26.   |  | e secrets, and other intellectual property ites, proceeds from royalties and licensing agree | ements  |   |
|       | ✓ No  Yes. Describe  |  |   |   |
|       |  |  |   |   |
| 27.   | Licenses, franchises, and other gener<br>Examples: Building permits, exclusive lice  | al intangibles<br>enses, cooperative association holdings, liquor                            | licenses, professional licenses   |   |
|       | ✓ No   |  |   |   |
|       | Yes. Describe  |  |   |   |
|       |  |  |   |   |
|       |  |  |   |   |
| Mon   | ney or property owed to you?   |  |   | Current value of the portion you own?  Do not deduct secured claims or exemptions.                          |
|       | ney or property owed to you?  Tax refunds owed to you  |  |   | portion you own? Do not deduct secured  |
|       |  |  |   | portion you own? Do not deduct secured  |
|       | Tax refunds owed to you  |  | Federal:  | portion you own? Do not deduct secured  |
|       | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns  |  | Federal:<br>State:  | portion you own? Do not deduct secured claims or exemptions.  |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years   |  |   | portion you own? Do not deduct secured claims or exemptions.  |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years   | , spousal support, child support, maintenance,   | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00                                 |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony   | , spousal support, child support, maintenance,   | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00                                 |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony   | , spousal support, child support, maintenance,   | State:  Local:  divorce settlement, property settlemen  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                        |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony   | , spousal support, child support, maintenance,   | State: Local: divorce settlement, property settlemen Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 tt                       |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony   | , spousal support, child support, maintenance,   | State: Local: divorce settlement, property settlemen Alimony: Maintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00                 |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony  ✓ No  Yes. Give specific information   | , spousal support, child support, maintenance,   | State: Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony  ✓ No  Yes. Give specific information  Other amounts someone owes you Examples: Unpaid wages, disability insura   | nce payments, disability benefits, sick pay, vacal loans you made to someone else            | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimony  ✓ No  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insura Social Security benefits; unpaid  | nce payments, disability benefits, sick pay, vaca  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony  ✓ No  Yes. Give specific information  Other amounts someone owes you Examples: Unpaid wages, disability insura   | nce payments, disability benefits, sick pay, vaca  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00   |

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| Deb  | tor 1 Antonio                                   | 10.11.1                   | Belk   | Case number (if known)                            |                                     |
|------|---|---------------------------|--|---|-------------------------------------|
|      | First Name                                      | Middle Name               | Last Name  |   |                                     |
| 31.  | Interests in insurance Examples: Health, disab  |                           | th savings account (HSA); credit,                                | homeowner's, or renter's insurance                |                                     |
|      | Yes. Name the insure of each policy and         |                           | Company name:  | Beneficiary:                                      | Surrender or refund value:          |
| 32.  | If you are the beneficiar property because some |                           |  | icy, or are currently entitled to receive         |                                     |
|      | Yes. Describe                                   |                           |  |   |                                     |
| 33.  |   |                           | ou have filed a lawsuit or mad<br>rance claims, or rights to sue | e a demand for payment                            |                                     |
|      | Yes. Describe                                   | Possible Lawsuit regardin | g reinstatement of Pension                                       |   |                                     |
| 34.  | Unknown Other contingent and to set off claims  | l unliquidated claims of  | every nature, including counte                                   | rclaims of the debtor and rights                  |                                     |
|      | No Yes. Describe                                |                           |  |   |                                     |
| 35.  | Any financial assets y                          | ou did not already list   |  |   |                                     |
|      | No Yes. Describe                                |                           |  |   |                                     |
| 36.  |   | •                         | n Part 4, including any entries                                  |   | \$5.00                              |
|      |   |                           |  |   |                                     |
| Part | 5: Describe Any B                               | usiness-Related Pro       | perty You Own or Have an   | Interest In. List any real estate in Part         | 1.                                  |
| 37.  | Do you own or have a                            | ny legal or equitable int | erest in any business-related p                                  | property?   |                                     |
|      | No. Go to Part 6. Yes. Go to line 38.           |                           |  | pe  | urrent value of the ortion you own? |
| 38.  |   | or commissions you alre   | ady earned   |   | exemptions                          |
|      | No Yes. Describe                                |                           |  |   |                                     |
| 39.  | Office equipment, fur<br>Examples: Business-rel |                           | modems, printers, copiers, fax n                                 | nachines, rugs, telephones, desks, chairs, electr | onic devices                        |
|      | ✓ No Yes. Describe                              |                           |  |   |                                     |
|      |   |                           |  |   |                                     |

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| Deb    | tor 1 Antonio                                      | Belk                                | Case number (if known)            |                              |
|--------|--|-------------------------------------|-----------------------------------|------------------------------|
|        | First Name Middle Nam                              | e Last Name                         |                                   |                              |
| 40.    | Machinery, fixtures, equipment, supplies yo        | u use in business, and tools of y   | our trade                         |                              |
|        | <b>☑</b> No  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        | Yes. Describe                                      |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        | <del></del>  |                                     |                                   |                              |
| 41.    | Inventory  |                                     |                                   |                              |
|        | No No  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        | Yes. Describe                                      |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
| 42.    | Interests in partnerships or joint ventures        |                                     |                                   |                              |
|        | ✓ No   |                                     |                                   |                              |
|        |  | Name of entity:                     | % of ownership:                   |                              |
|        | Yes. Give specific                                 |                                     |                                   |                              |
|        | information about them                             |                                     |                                   | <u> </u>                     |
|        | шеш  |                                     |                                   |                              |
|        |  | -                                   |                                   | <del>-</del>                 |
|        |  |                                     |                                   | <u> </u>                     |
| 43. (  | Customer lists, mailing lists, or other compile    | ations                              |                                   |                              |
|        |  |                                     |                                   |                              |
|        | ✓ No   |                                     |                                   |                              |
|        | Yes. Do your lists include personally identif      | iable information (as defined in 11 | U.S.C. § 101(41A))?               |                              |
|        | _  |                                     |                                   |                              |
|        | No   |                                     |                                   |                              |
|        | Yes. Describe                                      |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
| 44.    | Any business-related property you did not a        | Iready list                         |                                   |                              |
|        |  | •                                   |                                   |                              |
|        | ✓ No   |                                     |                                   |                              |
|        | Yes. Give specific                                 |                                     |                                   |                              |
|        | information  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        |  | -                                   |                                   | <del></del>                  |
|        |  |                                     |                                   |                              |
|        |  |                                     |                                   | <u> </u>                     |
|        |  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        |  | -                                   |                                   | <del></del>                  |
|        |  |                                     |                                   |                              |
| 45. A  | dd the dollar value of all of your entries from    | Part 5, including any entries fo    | r pages you have attached         |                              |
| for Pa | art 5. Write that number here                      |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
| Part   | Describe Any Farm- and Commerc                     |                                     | y You Own or Have an Interest In. |                              |
|        | If you own or have an interest in farmland, list i | t in Part 1.                        |                                   |                              |
| 46.    | Do you own or have any legal or equitable i        | nterest in any farm- or commer      | cial fishing-related property?    |                              |
|        |  | •                                   |                                   | Current value of the         |
|        | No. Go to Part 7.                                  |                                     |                                   | portion you own?             |
|        | Yes. Go to line 47.                                |                                     |                                   | Do not deduct secured claims |
|        |  |                                     |                                   | or exemptions                |
| 47.    | Farm animals                                       |                                     |                                   |                              |
|        | Examples: Livestock, poultry, farm-raised fish     |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        | <b>✓</b> No  |                                     |                                   |                              |
|        | Yes. Describe                                      |                                     |                                   |                              |
|        |  |                                     |                                   |                              |
|        |  |                                     |                                   |                              |

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| Debt         | or 1 Antonio First Name    |  | elk<br>st Name           | Case number (if known)         |              |
|--------------|----------------------------|--|--------------------------|--------------------------------|--------------|
| 48.          | Crops-either growing of    |  | st ivanie                |                                |              |
|              | . No                       |  |                          |                                |              |
|              | Yes. Describe              |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| 49.          | Farm and fishing equip     | oment, implements, machinery, fixture                                | s, and tools of trade    |                                |              |
|              | <b>√</b> No                |  |                          |                                |              |
|              | Yes. Describe              |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| 50.          | Farm and fishing suppl     | lies, chemicals, and feed  |                          |                                |              |
|              | <b>✓</b> No                |  |                          |                                |              |
|              | Yes. Describe              |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| 51.          | Any farm- and commer       | rcial fishing-related property you did n                             | ot already list          |                                |              |
|              | <b>✓</b> No                |  |                          |                                |              |
|              | Yes. Describe              |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| 52. Ad       | dd the dollar value of al  | I of your entries from Part 6, including                             | any entries for pages yo | ou have attached               |              |
|              |                            | here   |                          |                                |              |
|              |                            |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| Part 7       | 7: Describe All Pro        | perty You Own or Have an Intere                                      | st in That You Did No    | t List Above                   |              |
| 53.          |                            | perty of any kind you did not already lists, country club membership | st?                      |                                |              |
|              | ✓ No                       | , country out monitorismp  |                          |                                |              |
|              | Yes. Give specific         |  |                          |                                |              |
|              | information                |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| E4 A.        | dd tha dallay valva af al  | Lafverry autoica from Davit 7. Write the                             | t mumban bana            | 1                              |              |
| 54. A        | uu tile uollar value ol al | I of your entries from Part 7. Write tha                             | t number here            |                                |              |
|              |                            |  |                          |                                |              |
|              |                            |  |                          |                                |              |
|              |                            |  |                          |                                |              |
| Part 8       | List the Totals of         | Each Part of this Form   |                          |                                |              |
| 55. <b>F</b> | Part 1: Total real estate  | , line 2   |                          |                                | \$244463.00  |
|              |                            | •  |                          |                                |              |
| 56. <b>p</b> | oart 2 total vehicles, lin | e 5  | \$11300.00               |                                |              |
| 57. <b>P</b> | art 3: Total personal an   | d household items, line 15   | \$4300.00                |                                |              |
| 58. <b>P</b> | art 4: Total financial as  | sets, line 36  | \$5.00                   |                                |              |
| 59. <b>F</b> | Part 5: Total business-re  | elated property, line 45   |                          |                                |              |
| 60. <b>F</b> | Part 6: Total farm- and f  | ishing-related property, line 52                                     |                          |                                |              |
| 61. <b>F</b> | Part 7: Total other prop   | erty not listed, line 54   |                          |                                |              |
| 62. <b>T</b> | otal personal property.    | Add lines 56 through 61  | \$15605.00               |                                | , \$15605.00 |
|              |                            |  | \$15605.00               | Copy personal property total ► | + \$15605.00 |
|              |                            |  |                          |                                | \$260068.00  |
| 63. <b>T</b> | otal of all property on S  | chedule A/B. Add line 55 + line 62                                   |                          |                                |              |

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| Debtor 1 | Antonio    |             | Belk      | Case number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | First Name | Middle Neme | Last Nama |                        |  |

#### Schedule A/B: Property. Additional page

| Part 3: Describe Your Personal and Household Items |  |           |  |  |  |  |
|--|--|-----------|--|--|--|--|
| Do you own or have                                 | Current value of the portion you own?  Do not deduct secured claims or exemptions. |           |  |  |  |  |
| 12.2. Jewelry                                      | 12.2. Jewelry  |           |  |  |  |  |
| No   |  |           |  |  |  |  |
| Yes. Describe                                      | Wedding Band   | \$1500.00 |  |  |  |  |

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|  |   | Docu  | ment Page 21 of 73  |  |
|--|---|---|---|--|
| Fill in this info  | rmation to identify your case:  |   |   |  |
| Debtor 1   | Antonio   |   | Belk  |  |
|  | First Name  | Middle Name   | Last Name   |  |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name   | Last Name   |  |
| United States  | Bankruptcy Court for the: No  | rthern D  | istrict of Illinois   |  |
| Case number  |   |   | (State)   |  |
| Official   | Form 106C   |   |   | Check if this is a amended filing  |
| Schedul  | le C: The Proper  | ty You Claim a  | s Exempt  | 04/1   |
| state a spec the amount tax-exempt under a law your exempt  Part 1: Ide  1. Which se  You  You  2. For any | ific dollar amount as exe of any applicable statutor retirement funds—may be that limits the exemption tion would be limited to the exemptions are you claimare claiming state and federare claiming federal exemptions or schedule property you list on Schedule | mpt. Alternatively, youry limit. Some exempt be unlimited in dollar at a to a particular dollar he applicable statutor aim as Exempt ming? Check one only, eval nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) A/B that you claim as exempt as exemptions. | u may claim the full fair market valuions—such as those for health aids, amount. However, if you claim an examount and the value of the property amount.  The if your spouse is filing with you.  Stions. 11 U.S.C. § 522(b)(3)  Exempt, fill in the information below. | e of the property being exempted up to rights to receive certain benefits, and emption of 100% of fair market value ty is determined to exceed that amount |
|  | scription of the property and chedule A/B that lists this   | Current value of the portion you own  Copy the value from Schedule A/B  | Amount of the exemption you claim  Check only one box for each exemption.   | Specific laws that allow exemption   |
|  | 6 W 63rd PI,<br>ago, IL 60638   | \$244,463.00  | \$0  100% of fair market value, up to an applicable statutory limit   | 735 ILCS 5/12-901<br>y   |
| Brief<br>descriptio  |   | \$2,800.00  | \$1,900.00; \$900.00  | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)   |
| Line from<br>Schedule  |   |   | 100% of fair market value, up to an applicable statutory limit  | у  |

No Yes

**✓** No

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Antonio Belk Case number (if known)
First Name Middle Name Last Name

| art 2: Additional Page  |  |   |  |
|---|--|---|--|
| Brief description of the property and<br>line on Schedule A/B that lists this<br>property | Current value of<br>the portion you<br>own | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption           |
|   | Copy the value from<br>Schedule A/B        |   |  |
| Brief description:  | \$500.00                                   | \$500.00; \$0.00  | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| Cadillac SRX, 2005, Needs new Engine Line from Schedule A/B: 03                           |  | 100% of fair market value, up to any applicable statutory limit           | _  |
| Brief   | ¢100.00                                    | _   | 735 ILCS 5/12-1001(a)                        |
| description: Used Clothing  | \$100.00                                   | \$100.00  | _  |
| Line from Schedule A/B: 11  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief   | \$1,500.00                                 |   | 735 ILCS 5/12-1001(b)                        |
| description: Used Household Goods   | \$1,300.00                                 | \$1,500.00  | _  |
| Line from Schedule A/B: 06  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief   | \$0.00                                     | _   | 735 ILCS 5/12-1001(b)                        |
| description: Savings account, Citi  | \$0.00                                     | \$0   | _  |
| Line from Schedule A/B: 17  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief   | \$0.00                                     | _   | 735 ILCS 5/12-1001(b)                        |
| description: Savings account, Chase   | \$0.00                                     | \$0   | _  |
| Line from Schedule A/B: 17  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief description:  | \$100.00                                   |   | 735 ILCS 5/12-1001(b)                        |
| Used Mobile   | Ψ100.00                                    | \$100.00  | _  |
| Line from Schedule A/B: 07  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief description:  | \$5.00                                     |   | 735 ILCS 5/12-1001(b)                        |
| Cash in hand  | Ψ0.00                                      | \$5.00  | _  |
| Line from Schedule A/B: 16  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief description:  | \$100.00                                   |   | 735 ILCS 5/12-1001(b)                        |
| Glock 9   | Ψ100.00                                    | \$100.00  | _  |
| Line from Schedule A/B: 10  |  | 100% of fair market value, up to any applicable statutory limit           |  |
| Brief description:  | Unknown                                    |   | 735 ILCS 5/12-1001(h)(4)                     |
| Possible Lawsuit regarding reinstatement  |  | \$0 100% of fair market value, up to any                                  | _  |
| of Pension Line from  |  | applicable statutory limit  |  |
| Schedule A/B: 33  |  |   | 705 11 00 5 (40 4004 (1))                    |
| Brief description:  | \$1,000.00                                 | <b>✓</b>  | 735 ILCS 5/12-1001(b)                        |
| Ring  |  | \$0 100% of fair market value, up to any                                  | _  |
| Line from Schedule A/B: 12  |  | applicable statutory limit  |  |
|   |  |   |  |

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| Deb  | tor 1 Antonio First Name Midd   |   | Belk<br>Last Name            | Case number (if known)                          |  |
|------|---|---|------------------------------|---|--|
| Part | 2: Additional Page  |   |                              |   |  |
|      | Brief description of the property and line on Schedule A/B that lists this property | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | •                            | emption you claim x for each exemption.         | Specific laws that allow exemption           |
|      | Brief description:  Wedding Band Line from Schedule A/B: 12                         | \$1,500.00  | 100% of fair napplicable sta | \$0<br>narket value, up to any<br>atutory limit | 735 ILCS 5/12-1001(b)                        |
|      | Brief description:  Line from Schedule A/B: 03                                      | \$0.00  | 100% of fair n               | \$0<br>narket value, up to any                  | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |

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| Fill in         | this information to identify your ca   | se:                             |                                   |                                   |                             |   |
|-----------------|--|---------------------------------|-----------------------------------|-----------------------------------|-----------------------------|---|
| Debto           | or 1 Antonio   |                                 | Belk                              |                                   |                             |   |
| Dobte           | First Name   | Middle Name                     | Last Name                         |                                   |                             |   |
| Debto<br>(Spous | or 2<br>e, if filing) First Name   | Middle Name                     | Last Name                         |                                   |                             |   |
| United          |  |                                 | District of Illinois              |                                   |                             |   |
| Case            | number   |                                 | (State)                           |                                   |                             |   |
| (If knov        | vn)  |                                 |                                   |                                   |                             | Shook if this is a                        |
| Off             | icial Form 106D  |                                 |                                   |                                   |                             | Check if this is and the commended filing |
| Scl             | hedule D: Credite  | ors Who Have                    | Claims Secure                     | d by Prop                         | erty                        | 12/1                                      |
|                 | complete and accurate as possib<br>space is needed, copy the Additio         |                                 |                                   |                                   |                             |   |
|                 | and case number (if known).  | mar r age, mi it out, number    | the chines, and attach it to th   | is form. On the top               | or any additional pag       | cs, write your                            |
| 1. I            | Do any creditors have claims se  | ecured by your property?        |                                   |                                   |                             |   |
|                 | No. Check this box and subm  | nit this form to the court with | your other schedules. You have    | e nothing else to rep             | ort on this form.           |   |
| [               | Yes. Fill in all of the information  | n below.                        |                                   |                                   |                             |   |
| Part            | 1: List All Secured Claims   |                                 |                                   |                                   |                             |   |
| 2.              | List all secured claims. If a credit   |                                 |                                   | Column A                          | Column B                    | Column C                                  |
|                 | separately for each claim. If more the Part 2. As much as possible, list the | •                               |                                   | Amount of claim Do not deduct the | Value of collateral         | Unsecured                                 |
|                 |  |                                 |                                   | value of collateral.              | that supports<br>this claim | If any                                    |
| 2.1             | BK OF AMER   | Describe the property that      | it secures the claim:             | \$301,874.00                      | \$244,463.00                | \$57,411.00                               |
|                 | Creditor's Name 4909 SAVARESE CIRCLE FL1-                                    | 480 Mortgage (5526 W 63)        |                                   |                                   |                             |   |
|                 | 908-01-47  |                                 | e claim is: Check all that apply. |                                   |                             |   |
|                 | Number Street  | Contingent                      |                                   |                                   |                             |   |
|                 | TAMPA FL 33634   | Unliquidated                    |                                   |                                   |                             |   |
|                 | TAMPA FL 33634 City State ZIP Code   | Disputed                        |                                   |                                   |                             |   |
|                 | Who owes the debt? Check one.  | Nature of lien. Check all th    | at apply.                         |                                   |                             |   |
|                 | Debtor 1 only  Debtor 2 only   | An agreement you mad car loan)  | le (such as mortgage or secured   |                                   |                             |   |
|                 | Debtor 1 and Debtor 2 only   | Statutory lien (such as         | tax lien, mechanic's lien)        |                                   |                             |   |
|                 | At least one of the debtors  | Judgment lien from a la         | awsuit                            |                                   |                             |   |
|                 | and another  Check if this claim relates                                     | Other (including a right        | to offset)                        |                                   |                             |   |
|                 | to a community debt  | Last 4 digits of account n      | umber 3838                        |                                   |                             |   |
|                 | Date debt was 4/2007 incurred  |                                 |                                   |                                   |                             |   |
| 2.2             | MAFCU  | Describe the property that      | it secures the claim:             | \$8,191.00                        | \$8,000.00                  | \$191.00                                  |
|                 | Creditor's Name 17 FIRSTFIELD RD   | Jeep Cherokee                   | n occured the claim               |                                   |                             |   |
|                 | Number Street  |                                 | e claim is: Check all that apply. |                                   |                             |   |
|                 | -  | Contingent                      |                                   |                                   |                             |   |
|                 | GAITHERSBURG MD 20898  | Unliquidated                    |                                   |                                   |                             |   |
|                 | City State ZIP Code  Who owes the debt? Check one.                           | Disputed                        |                                   |                                   |                             |   |
|                 | ✓ Debtor 1 only  | Nature of lien. Check all th    | at apply.                         |                                   |                             |   |
|                 | Debtor 2 only  |                                 | le (such as mortgage or secured   |                                   |                             |   |
|                 | Debtor 1 and Debtor 2 only   | car loan)                       |                                   |                                   |                             |   |
|                 | At least one of the debtors  |                                 | tax lien, mechanic's lien)        |                                   |                             |   |
|                 | and another  Check if this claim relates                                     | Judgment lien from a la         |                                   |                                   |                             |   |
|                 | to a community debt  | Other (including a right        | ·                                 |                                   |                             |   |
|                 | Date debt was 6/2015 incurred  | Last 4 digits of account n      | umber 8151                        |                                   |                             |   |
|                 | Add the dollar value of y  | your entries in Column A on     | this page. Write that number      | \$310,065.00                      |                             |   |

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| Debtor 1 Antonio  | Belk  |  | number (if known)   |  |                                   |
|---|---|--|---|--|-----------------------------------|
| Additional Page  Part:1  After listing any entries 2.4, and so forth.   | Middle Name Last Na   | -  | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| CAP1/HLZBG Creditor's Name PO BOX 5253  Number Street  CAROL STREAM IL 6019 City State ZIPC Who owes the debt? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a another Check if this claim relates a community debt Date debt was 12/201      | Disputed e. Disputed  Nature of lien. Check all that  An agreement you made car loan)  Statutory lien (such as tax  Judgment lien from a law  other (including a right to | t apply.  (such as mortgage or secure x lien, mechanic's lien)  (sustited to offset) |   | \$1,000.00   | <u>\$1,175.00</u>                 |
| COMENITYCB/ZALES Creditor's Name PO BOX 182120  Number Street  COLUMBUS OH 432: City State ZIP C Who owes the debt? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a another Check if this claim relates a community debt Date debt was 12/201 | Disputed  Nature of lien. Check all that  An agreement you made car loan)  Statutory lien (such as ta:  Judgment lien from a law  other (including a right to             | t apply.  (such as mortgage or secure x lien, mechanic's lien)  (sustite to offset)  |   | \$1,500.00   | \$476.00                          |
| here:   | of your entries in Column A on this<br>of your form, add the dollar value<br>re:  |  | \$4,151.00<br>\$314,216.00  |  |                                   |

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| Fill i                         | n this infori                                     | nation to identify your c  | ase:   |   |   |                            |                                   |                                |
|--------------------------------|---|--|--|---|---|----------------------------|-----------------------------------|--------------------------------|
| Deb                            | tor 1   | Antonio  |  | Belk  |   |                            |                                   |                                |
|                                |   | First Name   | Middle Name  | Last Name   |   |                            |                                   |                                |
| Deb                            |   |  |  |   |   |                            |                                   |                                |
| (Spot                          | use, if filing)                                   | First Name   | Middle Name  | Last Name   |   |                            |                                   |                                |
| Unit                           | ed States B                                       | ankruptcy Court for the:   | Northern   | District of Illinois (State)  |   |                            |                                   |                                |
| Case<br>(If knd                | e number<br>own)                                  |  |  |   |   |                            |                                   |                                |
| Off                            | icial F   | orm 106E/F   |  |   |   | Che                        | eck if this is an                 | n amended filing               |
| Sc                             | hedu  | le E/F: Cre  | ditors Who   | Have Unse   | ecured Claims   |                            |                                   | 12/15                          |
| Form<br>clain<br>the e<br>know | 106A/B) ans that are<br>entries in the sinth (n). | and on Schedule G: Exe<br>listed in Schedule D: C<br>he boxes on the left. At            | cutory Contracts and Une<br>reditors Who Hold Claims | expired Leases (Officia<br>Secured by Property.                                       | n. Also list executory contracts<br>I Form 106G). Do not include a<br>If more space is needed, copy<br>e top of any additional pages, v | ny creditor<br>the Part yo | rs with partia<br>ou need, fill i | ally secured<br>it out, number |
| 1.                             | -   | editors have priority un<br>Go to Part 2.  | secured claims against y                             | ou?   |   |                            |                                   |                                |
| 2.                             | listed, ider<br>As much a<br>Continuati           | ntify what type of claim it<br>as possible, list the claims<br>on Page of Part 1. If mor | is. If a claim has both priorit                      | y and nonpriority amour<br>ding to the creditor's nar<br>particular claim, list the c |   | both priority              | and nonprio                       | rity amounts.                  |
|                                |   |  |  |   |   | Total<br>claim             | Priority amount                   | Nonpriority amount             |

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| Debte  | or 1        | Antonio First Name Middle Name   | Belk<br>Last Name     | Case number (if known)   |                   |
|--------|-------------|--|-----------------------|--|-------------------|
| Part : | 9.          | List All of Your NONPRIORITY Unsecu  |                       |  |                   |
| 3. [   |             | any creditors have nonpriority unsecured cla<br>No. You have nothing to report in this part. S<br>Yes. | ims against you?      | e court with your other schedules.   |                   |
| l<br>I | unse<br>f m | ecured claim, list the creditor separately for each  | claim. For each claim | er of the creditor who holds each claim. If a creditor has more<br>listed, identify what type of claim it is. Do not list claims already in<br>Part 3.If you have more than four priority unsecured claims fill ou | cluded in Part 1. |
|        |             |  |                       |  | Total claim       |
| 4.1    |             | APITALONE<br>onpriority Creditor's Name  |                       | Last 4 digits of account number 4217   | \$5,378.00        |
|        | c/          | o Pollack & Rosen, P.C   |                       | When was the debt incurred? 8/1996   |                   |
|        |             | umber Street<br>325 Barrett Lakes Blvd Suite 510   |                       | As of the date you file, the claim is: Check all that apply.   |                   |
|        | Ke          | ennesaw Georgia 3  | 30144                 | Contingent   |                   |
|        | Ci          | ity State Z  | Zip Code              | Unliquidated   |                   |
|        | W           | ho incurred the debt? Check one.  Debtor 1 only  |                       | Disputed   |                   |
|        | Ľ           | Debtor 2 only  |                       | Type of NONPRIORITY unsecured claim:   |                   |
|        | F           | Debtor 1 and Debtor 2 only   |                       | Student loans  |                   |
|        |             | At least one of the debtors and another  |                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                   |
|        | F           | ☐ Check if this claim relates to a community   | / debt                | Debts to pension or profit-sharing plans, and other similar debts  |                   |
|        | L<br>Is     | the claim subject to offset?   |                       | Other. Specify CreditCard  |                   |
|        | V           | No   |                       |  |                   |
|        |             | Yes  |                       |  |                   |
| 4.2    | C           | APITALONE  |                       | Last 4 digits of account number 5400   | \$1,753.00        |
|        |             | onpriority Creditor's Name<br>o Pollack & Rosen, P.C   |                       | When was the debt incurred? 7/2004   |                   |
|        | _           | umber Street   |                       |  |                   |
|        | 18          | 325 Barrett Lakes Blvd Suite 510   |                       | As of the date you file, the claim is: Check all that apply.  Contingent   |                   |
|        | Ke          | ennesaw Georgia G  | 30144                 | Unliquidated   |                   |
|        | Ci          | ity State The incurred the debt? Check one.  | Zip Code              | Disputed   |                   |
|        | Ï           | Debtor 1 only  |                       | Type of NONPRIORITY unsecured claim:   |                   |
|        | Ē           | Debtor 2 only  |                       | Student loans  |                   |
|        | F           | Debtor 1 and Debtor 2 only   |                       | Obligations arising out of a separation agreement or   |                   |
|        | F           | At least one of the debtors and another  |                       | divorce that you did not report as priority claims   |                   |
|        | F           | ☐ Check if this claim relates to a community   | / debt                | Debts to pension or profit-sharing plans, and other similar debts  |                   |
|        | ls          | the claim subject to offset?   |                       | Other. Specify CreditCard  |                   |
|        | V           | <b>■</b>   |                       | _  |                   |
|        |             | Yes  |                       |  |                   |
| 4.3    | C           | CS/FIRST NATIONAL BAN  |                       | Last 4 digits of account number 7226   | \$530.00          |
|        |             | onpriority Creditor's Name<br>00 E 60TH ST N   |                       | When was the debt incurred? 11/2017  |                   |
|        | _           | umber Street   |                       |  |                   |
|        | _           |  |                       | As of the date you file, the claim is: Check all that apply.  Contingent   |                   |
|        | SI          |  | 57104                 | Unliquidated   |                   |
|        | Ci          | ity State  'ho incurred the debt? Check one.   | Zip Code              | Disputed   |                   |
|        | Ÿ           | Debtor 1 only  |                       | Type of NONPRIORITY unsecured claim:   |                   |
|        | Ē           | Debtor 2 only  |                       | Student loans  |                   |
|        | F           | Debtor 1 and Debtor 2 only   |                       | Obligations arising out of a separation agreement or   |                   |
|        | F           | At least one of the debtors and another  |                       | divorce that you did not report as priority claims   |                   |
|        | F           | ⊒<br>☐ Check if this claim relates to a community  | / debt                | Debts to pension or profit-sharing plans, and other similar debts  |                   |
|        | L<br>Is     | the claim subject to offset?   | , - <del></del>       | Other. Specify CreditCard  |                   |
|        | V           | No   |                       |  |                   |
|        | Ē           | Yes  |                       |  |                   |

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 Debtor 1 First Name
 Antonio
 Belk Last Name
 Case number (if known)

|     | After listing any entries on this page, number them beginning   | with 4.5, followed by 4.6, and so forth.   | Total claim |
|-----|---|--|-------------|
| 4.4 | CHASE CARD Nonpriority Creditor's Name BANK ONE CARD SERV 2500 WESTFIELD DRI Number Street  | Last 4 digits of account number 1376 When was the debt incurred? 5/2000  As of the date you file, the claim is: Check all that apply.  | \$6,197.00  |
|     | ELGIN Illinois 60124 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify CreditCard   |             |
| 4.5 | CHASE CARD  Nonpriority Creditor's Name BANK ONE CARD SERV 2500 WESTFIELD DRI  Number Street  ELGIN Illinois 60124  City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  No | Last 4 digits of account number 6888  When was the debt incurred? 12/2006  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify CreditCard | \$1,022.00  |
| 4.6 | Tyes  COMENITYCB/HSN  Nonpriority Creditor's Name 995 W 122ND AVE  Number Street  WESTMINSTER Colorado 80234  City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  No       | Last 4 digits of account number 7973  When was the debt incurred? 11/2013  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify CreditCard | \$3,855.00  |

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Debtor 1 Antonio Belk Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation                | n Page  |             |
|--------|---|---|-------------|
|        | After listing any entries on this page, number them beginning w | rith 4.5, followed by 4.6, and so forth.  | Total claim |
| 4.7    | CREDIT ONE BANK NA  | Last 4 digits of account number 1990  | \$2,234.00  |
|        | Nonpriority Creditor's Name<br>PO BOX 98875                     | - Last 4 digits of account number 1280 When was the debt incurred? 9/2013                                       |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | LAS VEGAS Nevada 89193  | Unliquidated  |             |
|        | City State Zip Code Who incurred the debt? Check one.           | Disputed  |             |
|        | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or  |             |
|        | At least one of the debtors and another                         | divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar |             |
|        | Check if this claim relates to a community debt                 | debts   |             |
|        | Is the claim subject to offset?  No                             | Other. Specify CreditCard   |             |
|        | Yes   |   |             |
| 4.8    | CREDIT ONE BANK NA  | Last 4 digits of account number 2236  | \$1,127.00  |
|        | Nonpriority Creditor's Name<br>PO BOX 98875                     | When was the debt incurred? 9/2015  |             |
|        | Number Street   | <del></del>   |             |
|        |   | As of the date you file, the claim is: Check all that apply.  Contingent  |             |
|        | LAS VEGAS Nevada 89193  | <b>\</b>  |             |
|        | City State Zip Code   | Unliquidated  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only                | Disputed  |             |
|        | Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 1 and Debtor 2 only                                      | Student loans   |             |
|        | At least one of the debtors and another                         | Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |             |
|        | Check if this claim relates to a community debt                 | Debts to pension or profit-sharing plans, and other similar debts   |             |
|        | Is the claim subject to offset?                                 | Other. Specify CreditCard   |             |
|        | <b>✓</b> No   | _   |             |
|        | Yes   |   |             |
| 4.9    | DOUGLAS W. SMITH - Attorney At Law                              | Last 4 digits of account number   | \$1,910.18  |
|        | Nonpriority Creditor's Name<br>2021 Midwest Rd Suite 200        | When was the debt incurred?n/a  |             |
|        | Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|        |   | Contingent  |             |
|        | Oak Brook Illinois 60523  | Unliquidated  |             |
|        | City State Zip Code   | Disputed  |             |
|        | Who incurred the debt? Check one.  Debtor 1 only                | Type of NONPRIORITY unsecured claim:  |             |
|        | Debtor 2 only   | Student loans   |             |
|        | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or divorce that you did not report as priority claims         |             |
|        | At least one of the debtors and another                         | Debts to pension or profit-sharing plans, and other similar   |             |
|        | Check if this claim relates to a community debt                 | debts  Other. Specify  Unsecured Debt   |             |
|        | Is the claim subject to offset?                                 | <u> </u>  |             |
|        | <b>✓</b> No   |   |             |
|        | Yes   |   |             |

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Debtor 1 Antonio Belk Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 FIRST PREMIER BANK \$8.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 2/2018 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud 56302 Minnesota Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.11 **NELNET LOANS** \$1,964.00 0874 Last 4 digits of account number Nonpriority Creditor's Name 6420 SOUTHPOINT PKWY When was the debt incurred? 12/2004 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32216 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.12 SYNCB/ART VAN FURNITUR \$4,066.00 Last 4 digits of account number 0633 Nonpriority Creditor's Name When was the debt incurred? 5/2014 950 FORRER BLVD Number As of the date you file, the claim is: Check all that apply. Contingent 45420 KETTERING Ohio Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset?

No Yes

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Belk Debtor 1 Antonio Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 SYNCB/QVC \$1,750.00 Last 4 digits of account number 3666 Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? 9/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** 32896 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify Is the claim subject to offset? ◪ **✓** No Yes TRUST REC SV 4.14 \$200.00 Last 4 digits of account number 0066 Nonpriority Creditor's Name 541 OTIS BOWEN DRIVE When was the debt incurred? 7/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated MUNSTER Indiana 46321 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset?

✓ No ☐ Yes Case 18-09665 Doc 1 Filed 04/02/18 Entered 04/02/18 15:08:18 Desc Main Document Page 32 of 73

Debtor 1 Antonio Belk Case number (if known)
First Name Middle Name Last Name

Add the Amounts for Fool Type of Lineaured Claim

| Part 4: Add th              | ne Amounts for Each Type of Unsecured Claim  |         |                                  |
|-----------------------------|--|---------|----------------------------------|
|                             | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | statistical reporting purposes o |
|                             |  |         | Total claims                     |
| Total claims<br>from Part 1 | 6a. Domestic support obligations.  | 6a.     | \$0.00                           |
| nom Fait i                  | 6b. Taxes and certain other debts you owe the government   | 6b.     | \$0.00                           |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.     | \$0.00                           |
|                             | 6d. Other. Add all other priority unsecured claims. Write that   | 6d.     | \$0.00                           |
|                             | amount here.   |         | \$0.00                           |
|                             | 6e. Total. Add lines 6a through 6d.  | 6e.     |                                  |
|                             |  |         | Total claims                     |
| Total claims from Part 2    | 6f. Student loans  | 6f.     | \$1,964.00                       |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.     | \$0.00                           |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar  | 6h.     | \$0.00                           |
|                             | debts  |         | \$30,030.18                      |
|                             | <ol> <li>Other. Add all other nonpriority unsecured claims. Write<br/>that amount here.</li> </ol>           | 6i.     |                                  |
|                             | 6j. Total. Add lines 6f through 6i.  | 6j.     | \$31,994.18                      |

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| Fill in this information to identify your case: |                           |             |                      |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1  | Antonio                   |             | Belk                 |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |
|   |                           |             | (State)              |  |  |  |
| Case number                                     |                           |             |                      |  |  |  |
| (If known)                                      |                           |             |                      |  |  |  |

#### Official Form 106G

Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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|                                  |  | DC                              | cument rage   | 54 01 75   |
|----------------------------------|--|---------------------------------|---|--|
| Fill in this infor               | mation to identify your  | case:                           |   |  |
| Debtor 1                         | Antonio  |                                 | Belk  |  |
|                                  | First Name   | Middle Name                     | Last Name   |  |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name                     | Last Name   |  |
| United States E                  | Bankruptcy Court for the   | : Northern                      | District of Illinois                                  |  |
|                                  |  | -                               | (State)   |  |
| Case number (If known)           | -  |                                 |   |  |
|                                  |  |                                 |   | Check if this is an  |
| 0 ((; ; )                        |  |                                 |   | amended filing   |
| <u>Official</u>                  | <u>Form 106H</u>   |                                 |   |  |
| Schedul                          | e H: Your Co   | dehtors                         |   | 12/15  |
|                                  |  |                                 |   | complete and accurate as possible. If two married people are   |
| No Yes  2. Within the Idaho, Lou | e last 8 years, have yo<br>uisiana, Nevada, New M<br>Go to line 3. | exico, Puerto Rico, Texas, W    | perty state or territory? (ashington, and Wisconsin.) | Community property states and territories include Arizona, California,   |
| _ <b>_</b>                       | •  | ner spouse, or legal equiva     | lent live with you at the tir                         | ne?  |
|                                  | No<br>Yes. In which commur   | nity state or territory did you | ı live?   | Fill in the name and current address of that person.   |
|                                  | Name of your spouse,   | former spouse, or legal equ     | ivalent   |  |
|                                  | Number Street  |                                 |   | <del></del>  |
|                                  | City   | State                           | Zip Code  | e  |
| again as a                       | a codebtor only if that  | person is a guarantor or o      | osigner. Make sure you h                              | your spouse is filing with you. List the person shown in line 2 nave listed the creditor on Schedule D (Official Form 106D), dule D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in this in              | nformation to identify                               | your case:   |                      |        |                 |                     |  |
|------------------------------|--|--|----------------------|--------|-----------------|---------------------|--|
| Debtor 1                     | Antonio  |  | Belk                 |        |                 |                     |  |
| Dobtor 1                     | First Name   | Middle Name  | Last N               | lame   | )               | — Che               | eck if this is:  |
| Debtor 2                     |  |  |                      |        |                 |                     | An amended filing  |
| (Spouse, if filing           | First Name   | Middle Name  | Last N               | lame   | 9               |                     | •  |
|                              | Bankruptcy Court for                                 | Northern   | _ District of III    |        |                 |                     | A supplement showing post-petition chapter<br>expenses as of the following date: |
| the:<br>Case numbe           | r  |  | (3                   | State  | <del>!</del> )  |                     |  |
| (If known)                   |  |  |                      |        |                 |                     | MM / DD / YYYY   |
| Official                     | Form 106I  |  |                      |        |                 |                     |  |
| Schedu                       | ıle I: Your In                                       | come   |                      |        |                 |                     | 12   |
| spouse. If m<br>number (if k |  | l, attach a separate she<br>y question.                    |                      |        | _               | -                   | not include information about your<br>ional pages, write your name and case      |
| Fill in yo informat          | ur employment  |  | Debtor 1             | ı      |                 |                     | Debtor 2   |
|                              |  | Employment status  | <b>✓</b> Emplo       | oved   |                 |                     | Employed   |
| -                            | ve more than one job,<br>separate page with          |  | Not E                | -      | yed             |                     | Not Employed   |
| information employer         | on about additional<br>s.                            | Occupation   | Security             |        |                 |                     |  |
|                              | art time, seasonal, or oyed work.                    | Employer's name  | Secretary            | of St  | ate of Illinois | 3                   |  |
|                              | •  | Employer's address   | 9901 S. K            | (ing l | Dr.             |                     |  |
|                              | on may include student naker, if it applies.         |  | Number St            | reet   |                 |                     | Number Street  |
|                              |  |  |                      |        |                 |                     |  |
|                              |  |  | Chicago              |        | Illinois        | 60628               |  |
|                              |  |  | City                 |        | State           | Zip Code            | City State Zip Code  |
|                              |  | How long employed there?                                   |                      |        |                 |                     |  |
| Part 2: Gi                   | ve Details About N                                   | Monthly Income   |                      |        |                 |                     |  |
|                              |  |  | <b>n</b> If you have | noth   | aina to rope    | art for any line.   | write \$0 in the space. Include your non-filing                                  |
|                              | ess you are separated.                               | ine date you me tins for                                   | ii. II you nave      | TIOU   | iiig to rept    | ortion arry line, v | write to in the space. Include your non-ming                                     |
|                              | ur non-filing spouse hav<br>e, attach a separate she |  | combine the          | info   | rmation for     | all employers fo    | or that person on the lines below. If you need                                   |
|                              |  |  |                      |        | For I           | Debtor 1            | For Debtor 2 or non-filing spouse  |
|                              |  | ary, and commissions (befo<br>, calculate what the monthly |                      | 2.     |                 | \$3,559.00          |  |
| 3. Estima                    | te and list monthly ove                              | rtime pay.   |                      | 3.     |                 | + \$0.00            |  |
| 4. Calcul                    | ate gross income. Add I                              | ine 2 + line 3.  |                      | 4.     |                 | \$3,559.00          |  |

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| Debtor 1Antonio  |  | Belk                | Case number (if       |                   |          |                          |
|--|--|---------------------|-----------------------|-------------------|----------|--------------------------|
| First Name   | Middle Name  | Last Name           | known)                | For Debtor 2 or   |          |                          |
|  |  |                     | For Debtor 1          | non-filing spouse |          |                          |
| Copy line 4 here   |  | <b>→</b> 4.         | \$3,559.00            |                   | -        |                          |
| 5. List all payroll deductions:                                |  |                     |                       |                   |          |                          |
| 5a. Tax, Medicare, and Socia                                   | al Security deductions   | 5a.                 | \$1,051.00            |                   |          |                          |
| 5b. Mandatory contributions                                    | s for retirement plans   | 5b.                 | \$0.00                |                   |          |                          |
| 5c. Voluntary contributions f                                  | for retirement plans   | 5c.                 | \$0.00                |                   |          |                          |
| 5d. Required repayments of                                     | retirement fund loans  | 5d.                 | \$0.00                |                   |          |                          |
| 5e. Insurance  |  | 5e.                 | \$0.00                |                   |          |                          |
| 5f. Domestic support obligat                                   | tions  | 5f.                 | \$0.00                |                   |          |                          |
| 5g. <b>Union dues</b>  |  | 5g.                 | \$0.00                |                   |          |                          |
| 5h. Other deductions. Specif                                   | y:   | _ 5h. +             | \$0.00 +              | ·                 |          |                          |
| 6. Add the payroll deductions. (+5h.                           | Add lines 5a + 5b + 5c + 5d + 5e +5  | f + 5g 6.           | \$1,051.00            |                   |          |                          |
| 7. Calculate total monthly take                                | -home pay. Subtract line 6 from line   | e 4. 7.             | \$2,508.00            |                   |          |                          |
| 8. List all other income regular                               | ly received:   |                     |                       |                   |          |                          |
| business, profession, or f                                     | oroperty and from operating a farm In property and business showing  |                     |                       |                   |          |                          |
| gross receipts, ordinary and<br>the total monthly net incom    | d necessary business expenses, and   | 8a.                 | \$0.00                |                   |          |                          |
| 8b. Interest and dividends                                     |  | 8b.                 | \$0.00                |                   |          |                          |
|  | s that you, a non-filing spouse, or  | •                   | ψο.σο                 |                   |          |                          |
|  | support, child support, maintenance,   | 8c.                 | \$0.00                |                   |          |                          |
| 8d. Unemployment compens                                       | sation   | 8d.                 | \$0.00                |                   |          |                          |
| 8e. Social Security  |  | 8e.                 | \$0.00                |                   |          |                          |
| Include cash assistance and cash assistance that you re        | ance that you regularly receive<br>d the value (if known) of any non-<br>ceive, such as food stamps (benefits<br>utrition Assistance Program) or | 8f.                 | \$0.00                |                   |          |                          |
| 8g. Pension or retirement in                                   | come   | 8g.                 | \$0.00                |                   |          |                          |
| 8h. Other monthly income.                                      |  | 8h. +               | \$1,315.73 +          |                   |          |                          |
|  | es 8a + 8b + 8c + 8d + 8e + 8f +8g -   |                     | \$1,315.73            |                   | 7        |                          |
|  | _  | Ŀ                   | ψ1,010.70             |                   | ]<br>- — |                          |
| 10. Calculate monthly income. Add the entries in line 10 for D | Add line 7 + line 9.<br>ebtor 1 and Debtor 2 or non-filing sp  | 10.<br>pouse        | \$3,823.73            |                   | =        | \$3,823.73               |
| Include contributions from an friends or relatives.            | ributions to the expenses that you<br>unmarried partner, members of your<br>lready included in lines 2-10 or amou                                | household, your d   | ependents, your roomr |                   |          |                          |
| Specify:   |  |                     |                       |                   | 11. +    | \$0.00                   |
| 40 4111  |  |                     |                       |                   |          |                          |
|  | column of line 10 to the amount i<br>mary of Schedules and Statistical Su  |                     |                       |                   | 12.      | \$3,823.73               |
|  |  |                     |                       |                   |          | ombined<br>onthly income |
| 13. Do you expect an increase                                  | or decrease within the year after  | you file this form? |                       |                   |          |                          |
| ✓ No.  |  |                     |                       |                   |          |                          |
| Yes. Explain:  |  |                     |                       |                   |          |                          |
| L 163. Explain.  |  |                     |                       |                   |          |                          |
|  |  |                     |                       |                   |          |                          |

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| Debtor 1Antonio          |                   | Belk         |          | Case number (if |       |          |  |
|--------------------------|-------------------|--------------|----------|-----------------|-------|----------|--|
| First Name               | Middle Name       | Last Nam     | ie       | known)          |       |          |  |
| Part 1: Describe Employm | ent               |              |          |                 |       |          |  |
|                          | Debtor 1          |              |          | Debtor 2        |       |          |  |
| Employment status        | <b>✓</b> Employed |              |          | Employed        |       |          |  |
|                          | Not Employed      |              |          | Not Employe     | ed    |          |  |
| Occupation               | Carpenter         |              |          |                 |       |          |  |
| Employer's name          | Sho-Link, Inc     |              |          |                 |       |          |  |
| Employer's address       | 28045 N. Ashley C | Cir. STE 101 |          |                 |       |          |  |
|                          | Number Street     |              |          | Number Street   |       |          |  |
|                          |                   |              |          |                 |       |          |  |
|                          | Libertyville      | Illinois     | 60048    |                 |       |          |  |
|                          | City              | State        | Zip Code | City            | State | Zip Code |  |
| How long employed there? |                   |              |          |                 |       |          |  |

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Debtor 1 Antonio Belk Case number (if First Name Middle Name Last Name Known)

Part 2: Give Details About Monthly Income

Official Form 106l. Additional page.

For Debtor 1 For Debtor 2 or non-filing spouse

8h.Other monthly income. Specify:

1. Sho-Link, Inc \$1,315.73

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|  |  | Восс   | ament 1 age 33 of 7                                 | J                             |                       |                     |
|--|--|--|---|-------------------------------|-----------------------|---------------------|
| Fill in this infor   | rmation to identify  | your case:   |   |                               |                       |                     |
| Debtor 1   | Antonio  |  | Belk  |                               |                       |                     |
| Dalatan  | First Name   | Middle Name  | Last Name   | Check if this is:             |                       |                     |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Last Name   | An amended fili               | ng                    |                     |
| United States B  | Bankruptcy Court fo  | or the: Northern   | District of Illinois                                | A supplement s expenses as of |                       | petition chapter 13 |
| Case number  |  |  | (State)   | expenses as or                | uic iollowing         | dato.               |
| (If known)   |  |  | _   | MM / DD / YYY                 | Y                     |                     |
| Official   | Form 106   | 3,1  |   |                               |                       |                     |
| -  | e J: Your  |  |   |                               |                       | 12/15               |
| information. If (if known). Ans  Part 1: Des  1. Is this a joi  No. Go | more space is ne swer every question cribe Your Housint case? To to line 2 To be better 2 live  No Yes. Debtor 2 r | in a separate household?  nust file Official Forms 106J-2, Exper           | s form. On the top of any addition                  | aal pages, write your r       |                       |                     |
| 2. Do you hav  | ve dependents?   | No   |   |                               |                       |                     |
| Do not list Debtor 2.  | Debtor 1 and   | Yes. Fill out this information for each dependent                          | Dependent's relationship to<br>Debtor 1 or Debtor 2 | Dependent's age               | Does dep<br>with you? | endent live         |
|  |  |  | Fiance  | 28 years                      | No.                   | •                   |
|  |  |  |   | <u> </u>                      | ✓ Yes.                |                     |
|  |  |  | Step-Child  | 6 years                       | No.                   |                     |
|  |  |  |   |                               | ✓ Yes.                |                     |
| expenses of<br>than<br>yourself an<br>dependent                        | s?   | ✓ No  Yes  |   |                               |                       |                     |
| Part 2: Esti   | mate Your Ong  | oing Monthly Expenses  |   |                               |                       |                     |
|  | of a date after the  | our bankruptcy filing date unless<br>bankruptcy is filed. If this is a sup | -   |                               |                       |                     |
| -  |  | non-cash government assistance uded it on Schedule I: Your Income          | =   |                               |                       | Your expenses       |
|  | I or home owners<br>or the ground or lo  | hip expenses for your residence. Int. 4.                                   | nclude first mortgage payments and                  | i                             | 4.                    | \$2,610.00          |
| If not inc   | luded in line 4:   |  |   |                               |                       |                     |
|  | state taxes  |  |   |                               | 4a                    | \$0.00              |
| 4b. Prope  | erty, homeowner's,   | or renter's insurance  |   |                               | 4b.                   | \$0.00              |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Antonio
 Belk
 Case number (if known)

 Last Name
 Last Name

| First Name Middle Name Last I  | Name                              |               |
|--|-----------------------------------|---------------|
|  |                                   | Your expenses |
| 5. Additional mortgage payments for your residence, such as home e                                   | equity loans 5.                   | \$0.00        |
| 6. Utilities:  |                                   |               |
| 6a. Electricity, heat, natural gas   | 6a.                               | \$150.00      |
| 6b. Water, sewer, garbage collection   | 6b.                               | \$50.00       |
| 6c. Telephone, cell phone, Internet, satellite, and cable services                                   | 6c.                               | \$265.00      |
| 6d. Other. Specify:  | 6d                                | \$0.00        |
| 7. Food and housekeeping supplies  | 7.                                | \$275.00      |
| 8. Childcare and children's education costs  | 8.                                | \$0.00        |
| 9. Clothing, laundry, and dry cleaning   | 9.                                | \$10.00       |
| 10. Personal care products and services  | 10.                               | \$10.00       |
| 11. Medical and dental expenses  | 11.                               | \$0.00        |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments | 12.                               | \$80.00       |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and b                                   | <b>Dooks</b> 13.                  | \$0.00        |
| 14. Charitable contributions and religious donations   | 14.                               | \$0.00        |
| 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4               | 4 or 20.                          |               |
| 15a. Life insurance  | 15a                               | \$0.00        |
| 15b. Health insurance  | 15b                               | \$0.00        |
| 15c. Vehicle insurance   | 15c                               | \$190.00      |
| 15d. Other insurance. Specify:   | 15d                               | \$0.00        |
| 16. Taxes. Do not include taxes deducted from your pay or included in lin                            | les 4 or 20.                      |               |
| Specify:   |                                   | \$0.00        |
| 17. Installment or lease payments:   |                                   |               |
| 17a. Car payments for Vehicle 1  | 17a                               | \$0.00        |
| 17b. Car payments for Vehicle 2  | 17b                               | \$0.00        |
| 17c. Other. Specify: Zales   |                                   | \$67.00       |
| 17d. Other. Specify: Helzberg  | 17d                               | \$109.00      |
| 18. Your payments of alimony, maintenance, and support that you d                                    | •                                 | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).                                    |                                   |               |
| 19. Other payments you make to support others who do not live with Specify:                          |                                   | Ф0.00         |
| 20.Other real property expenses not included in lines 4 or 5 of this fo                              | orm or on Schedule I: Your Income | \$0.00        |
| 20a. Mortgages on other property   | 20a                               | \$0.00        |
| 20b. Real estate taxes.  | 20b                               | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  | 20c                               | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   |                                   | <del></del>   |
|  | 20d                               | \$0.00        |

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| Debtor 1 Anton         | io                     |                             | Belk  | Case number (if known) |     |             |
|------------------------|------------------------|-----------------------------|---|------------------------|-----|-------------|
| First N                | ame                    | Middle Name                 | Last Name   |                        |     |             |
| 21. <b>Other.</b> Spec | cify:                  |                             |   |                        | 21  | \$0.00      |
| 22. Calculate          | your monthly expen     | ses.                        |   |                        |     | \$3,816.00  |
| 22a. Add lin           | es 4 through 21.       |                             |   |                        |     | \$0.00      |
| 22b. Copy I            | ine 22 (monthly expe   | nses for Debtor 2), if any, | from Official Form 106J-2                                   |                        |     | \$3,816.00  |
| 22c. Add lin           | e 22a and 22b. The r   | esult is your monthly exp   | enses.  |                        | 22. | <del></del> |
| 23.Calculate           | our monthly net inc    | ome.                        |   |                        |     |             |
| 23a. Copy I            | ne 12 (your combine    | d monthly income) from      | Schedule I.   |                        | 23a | \$3,823.73  |
| 23b. Copy              | our monthly expense    | es from line 22 above.      |   |                        | 23b | \$3,816.00  |
| 23c. Subtra            | ct your monthly exper  | nses from your monthly in   | ncome.  |                        |     | \$7.73      |
| The re                 | sult is your monthly n | net income.                 |   |                        | 23c | <u></u>     |
|                        |                        |                             | oan within the year or do y<br>nodification to the terms of |                        |     |             |

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| Debtor 1            | Antonio                   |             | Belk                         |
|---------------------|---------------------------|-------------|------------------------------|
|                     | First Name                | Middle Name | Last Name                    |
| Debtor 2            |                           |             |                              |
| (Spouse, if filing) | First Name                | Middle Name | Last Name                    |
| United States E     | Bankruptcy Court for the: | Northern    | District of Illinois (State) |
| Case number         |                           |             |                              |

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |  |
|-----|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                    | nelp you fill out bankruptcy forms?  |
|     | <b>✓</b> No  |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and<br>Signature (Official Form 119). |
|     |  |  |
|     |  |  |
|     | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and  |
| ×   | /s/ Antonio Belk   | ×  |
|     | Signature of Debtor 1  | Signature of Debtor 2  |
|     | Date 4/2/2018 MM/DD/YYYY   | Date MM/DD/YYYY  |
|     | IVIIVI/DD/YYYY   | MINIOUNTY  |

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| Fill i          | n this inf               | formation to identify you         | ur case:                             |   |                      |             |                   |                                   |
|-----------------|--------------------------|-----------------------------------|--------------------------------------|---|----------------------|-------------|-------------------|-----------------------------------|
| Deb             | tor 1                    | Antonio                           |                                      | Belk  |                      |             |                   |                                   |
| Dute            | 10                       | First Name                        | Middle                               | Name Last N   | ame                  |             |                   |                                   |
|                 | tor 2<br>use, if filing) | First Name                        | Middle                               | Name Last N   | ame                  |             |                   |                                   |
| Unit            | ed States                | s Bankruptcy Court for t          | ne: Northern                         | District of III                                     | inois                |             |                   |                                   |
| Case<br>(If kno | e numbe<br>own)          | er                                |                                      | (S  | State)               |             |                   |                                   |
| Of              | ficia                    | l Form 107                        |                                      |   |                      | <u> </u>    |                   | Check if this is a amended filing |
| Sta             | atem                     | ent of Financ                     | ial Affairs                          | for Individuals                                     | s Filing for         | Bankru      | ptcv              | 04/1                              |
| Be a            | s comp<br>rmation        | lete and accurate as              | possible. If two neded, attach a sep | narried people are filin<br>parate sheet to this fo | g together, both     | are equally | responsible for s |                                   |
| Pari            | t 1: Giv                 | ve Details About Yo               | ur Marital Status                    | s and Where You Live                                | ed Before            |             |                   |                                   |
| 1.              | What i                   | is your current marital           | status?                              |   |                      |             |                   |                                   |
|                 |                          | farried<br>lot married            |                                      |   |                      |             |                   |                                   |
|                 | Duning                   | m the lest 2 years have           | lived encuber                        |   | live mave2           |             |                   |                                   |
| 2.              |                          |                                   | e you lived anywner                  | re other than where you                             | inve now?            |             |                   |                                   |
|                 | ✓ N                      |                                   | s you lived in the la                | st 3 years. Do not includ                           | e where you live n   | OW.         |                   |                                   |
|                 | D                        | Debtor 1:                         |                                      | Dates Debtor 1 lived there                          | Debtor 2:            |             |                   | Dates Debtor 2 lived there        |
|                 |                          |                                   |                                      |   | Same as              | Debtor 1    |                   | Same as Debtor 1                  |
|                 | N                        | lumber Street                     |                                      | From  | Number Stree         | et          |                   | From                              |
|                 | _                        |                                   |                                      | То  |                      |             |                   | To                                |
|                 | C                        | City State                        | Zip Code                             |   | City                 | State       | Zip Code          |                                   |
|                 | _                        | •                                 | <u> </u>                             |   | Same as              | Debtor 1    | ·                 | Same as Debtor 1                  |
|                 | N                        | lumber Street                     |                                      | From  | Number Stree         | et          |                   | From                              |
|                 | _                        |                                   |                                      | То  |                      |             |                   | To                                |
|                 | C                        | City State                        | Zip Code                             |   | City                 | State       | Zip Code          |                                   |
| 3.              | and terri                | <i>itories</i> include Arizona, C | alifornia, Idaho, Lou                | pouse or legal equivale<br>isiana, Nevada, New Mexi | co, Puerto Rico, Tex |             |                   | ommunity property states          |

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| btor 1               | Antonio   | Belk  | Case n   | umber (if known)                                       |   |
|----------------------|---|---|--|--|---|
|                      | First Name Middle   | e Name Last Na  | me   |  |   |
| t 2:                 | <b>Explain the Sources of Your Inc</b>  | come  |  |  |   |
| <b>Did</b><br>Fill i | you have any income from employm n the total amount of income you receiv rities. If you are filing a joint case and yo No Yes. Fill in the details. | ent or from operating a buved from all jobs and all bus | inesses, including part-time                                     |  | ears?   |
|                      |   | Debtor 1  |  | Debtor 2   |   |
|                      |   | Sources of income<br>Check all that apply.              | Gross income<br>(before deductions and<br>exclusions)            | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)           |
|                      | om January 1 of current year until<br>e date you filed for bankruptcy:  | Wages, commissions, bonuses, tips Operating a business  | \$4298.00  | Wages, commissions, bonuses, tips Operating a business |   |
|                      | or last calendar year: anuary 1 to December 31, 2017 ) YYYY   | Wages, commissions, bonuses, tips Operating a business  | \$100000.00  | Wages, commissions, bonuses, tips Operating a business |   |
|                      | or the calendar year before that:<br>anuary 1 to December 31, 2016 )<br>YYYY  | Wages, commissions, bonuses, tips Operating a business  | \$106715.00  | Wages, commissions, bonuses, tips Operating a business |   |
| filing               | ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details.  | you received together, list it                          | only once under Debtor 1.  |  | ottery winnings. If you are                                     |
|                      |   | Debtor 1  |  | Debtor 2   |   |
|                      |   | Sources of income<br>Describe below.                    | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below.                   | Gross income from each source (before deductions an exclusions) |
|                      | rom January 1 of current year until<br>ne date you filed for bankruptcy:  |   |  |  |   |
|                      | or last calendar year: lanuary 1 to December 31, 2017 )  YYYY   |   |  |  |   |
|                      | or the calendar year before that:<br>lanuary 1 to December 31, 2016 )<br>YYYY   |   |  |  |   |
|                      |   |   |  |  |   |

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Belk Debtor 1 Antonio Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors Other

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| r 1              | Antonio Antonio                      |  |   | Bel                                  | k   | Case number                                 | (if known)   |
|------------------|--------------------------------------|--|---|--------------------------------------|---|---|--|
|                  | First Name                           |  | Middle Name   | Las                                  | t Name  |   |  |
| nsi<br>orp<br>ge | ders include your porations of which | relatives; a<br>you are a<br>for a busin | ny general partners<br>n officer, director, p<br>ess you operate as | relatives of any operson in control, | general partners; parti<br>or owner of 20% or | nerships of which y<br>more of their voting | who was an insider? ou are a general partner; securities; and any managing domestic support obligations, |
| <b>✓</b>         | No                                   |  |   |                                      |   |   |  |
|                  | Yes. List all pay                    | ments to a                               | ın insider.   |                                      |   |   |  |
|                  |                                      |  |   | Dates of payment                     | Total amount paid                             | Amount you still owe                        | Reason for this payment  |
|                  | Insider's Name                       |  |   |                                      |   |   |  |
|                  | Number Street                        |  |   |                                      |   |   |  |
| _                | City                                 | State                                    | Zip Code  |                                      |   |   |  |
|                  | Insider's Name                       |  |   |                                      |   |   |  |
|                  | Number Street                        |  |   |                                      |   |   |  |
|                  | City                                 | State                                    | Zip Code  |                                      |   |   |  |
|                  | No                                   | _  | ranteed or cosigne  |                                      | Total amount paid                             | Amount you still owe                        | Reason for this payment  |
|                  |                                      |  |   |                                      |   |   | Include creditor's name  |
|                  |                                      |  |   |                                      |   |   | moduce ordanor e marrie  |
|                  | Insider's Name                       |  |   |                                      |   |   | modes sicultor e mano  |
|                  | Insider's Name Number Street         |  |   |                                      |   |   | modes sicalis e mane   |
|                  | Number Street                        | State                                    | Zip Code  |                                      |   |   | modes sicultor e mane  |
| -                | Number Street                        | State                                    | Zip Code  |                                      |   |   | modes diseases a mane  |
| _                | Number Street  City                  | State                                    | Zip Code  |                                      |   |   |  |
| _                | Number Street  City  Insider's Name  | State                                    | Zip Code  |                                      |   |   |  |

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Debtor 1 Antonio Case number (if known) First Name Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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|        | or 1 Antonio  | Belk                                | Case number (if known)            |                    |                     |
|--------|---|-------------------------------------|-----------------------------------|--------------------|---------------------|
|        | First Name Middle Name  | Last Name                           | <u> </u>                          |                    |                     |
| 11.    | Within 90 days before you filed for bankruptc accounts or refuse to make a payment becau  |                                     | oank or financial institution, se | et off any amou    | ints from your      |
|        | <b>☑</b> No   |                                     |                                   |                    |                     |
|        |   |                                     |                                   |                    |                     |
|        | Yes. Fill in the details.   |                                     |                                   |                    |                     |
|        |   | Describe the action th              | e creditor took                   | Date action        | Amount              |
|        |   |                                     |                                   | was taken          |                     |
|        |   |                                     |                                   |                    |                     |
|        | Creditor's Name   |                                     |                                   |                    |                     |
|        |   |                                     |                                   |                    |                     |
|        | Number Street   |                                     |                                   |                    |                     |
|        |   | Last 4 digits of account            | number: XXXX-                     |                    |                     |
|        |   |                                     |                                   |                    |                     |
|        | City State Zip Code   |                                     |                                   |                    |                     |
|        | City State Zip Code   | •                                   |                                   |                    |                     |
|        | Within 1 year before you filed for bankruptcy, appointed receiver, a custodian, or another of   |                                     | possession of an assignee for     | the benefit of o   | creditors, a court- |
|        | <b>▽</b> No   |                                     |                                   |                    |                     |
|        | <b>≌</b>  |                                     |                                   |                    |                     |
|        | Yes   |                                     |                                   |                    |                     |
| Part : | 5: List Certain Gifts and Contributions   |                                     |                                   |                    |                     |
|        |   |                                     |                                   |                    |                     |
| 13.    | Within 2 years before you filed for bankrupto   | ey, did you give any gifts with a t | otal value of more than \$600 p   | er person?         |                     |
|        | - N   |                                     |                                   |                    |                     |
|        | ✓ No  |                                     |                                   |                    |                     |
|        |   |                                     |                                   |                    |                     |
|        | Yes. Fill in the details for each gift.   |                                     |                                   |                    |                     |
|        | Yes. Fill in the details for each gift.  Gifts with a total value of more than \$60 per person  | Describe the gifts                  |                                   | Dates you gave the | Value               |
|        | Gifts with a total value of more than \$60  | O Describe the gifts                |                                   |                    | Value               |
|        | Gifts with a total value of more than \$60 per person   | Describe the gifts                  |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60  | Describe the gifts                  |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person   | Describe the gifts                  |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift   | Describe the gifts                  |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person   | Describe the gifts                  |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code   |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code   |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code   |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  Person to Whom You Gave the Gift                |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  Person to Whom You Gave the Gift  Number Street |                                     |                                   | gave the           | Value               |
|        | Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift  Number Street  City State Zip Code Person's relationship to you  Person to Whom You Gave the Gift                |                                     |                                   | gave the           | Value               |

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|          | Antonio  |   | Belk Case  | number <i>(if known)</i> |   |                    |
|----------|--|---|--|--------------------------|---|--------------------|
|          | First Name   | Middle Name   | Last Name  |                          |   |                    |
|          |  |   |  |                          |   |                    |
| Wi       | thin 2 years before you filed  | d for bankruptcy, did   | you give any gifts or contributions with   | a total value of m       | ore than \$600                            | to any charity?    |
| <b>✓</b> | No   |   |  |                          |   |                    |
| ¥        |  |   |  |                          |   |                    |
| L        | Yes. Fill in the details for e   | each giπ or contribution  | on.  |                          |   |                    |
|          | Gifts or contributions to  | charities   | Describe what you contributed  | ľ                        | Date you                                  | Value              |
|          | that total more than \$600   | )   | ŕ  |                          | contributed                               |                    |
|          |  |   |  |                          |   |                    |
|          | <del>-</del>   |   | _  | -                        |   |                    |
|          | Charity's Name   |   |  |                          |   |                    |
|          |  |   | _  |                          |   |                    |
|          |  |   |  |                          |   |                    |
|          | Number Street  |   | -  |                          |   |                    |
|          |  |   |  |                          |   |                    |
|          | City State   | Zip Code  | -  |                          |   |                    |
|          |  | ·   |  |                          |   |                    |
| t 6:     | List Certain Losses  |   |  |                          |   |                    |
| <b>✓</b> | No Yes. Fill in the details.  Describe the property you how the loss occurred  | u lost and  | Describe any insurance coverage for include the amount that insurance has                                    | s paid. List             | Date of your<br>loss                      | Value of property  |
|          |  |   | pending insurance claims on line 33 of A/B: Property.  | f <i>Schedule</i>        |   |                    |
|          |  |   |  |                          |   |                    |
|          |  |   |  |                          |   |                    |
|          |  |   |  |                          |   |                    |
| abo      | out seeking bankruptcy or p  | for bankruptcy, did y<br>preparing a bankrup  |  |                          |   | nyone you consult  |
| Wit      | hin 1 year before you filed<br>out seeking bankruptcy or p   | for bankruptcy, did y<br>preparing a bankrup  |  |                          |   | nnyone you consult |
| Wit      | thin 1 year before you filed<br>out seeking bankruptcy or p<br>lude any attorneys, bankruptc<br>No   | for bankruptcy, did y<br>preparing a bankrup  | tcy petition?  | uired in your bankr      |   | Amount of payment  |
| Wit      | thin 1 year before you filed out seeking bankruptcy or plude any attorneys, bankruptcy No Yes. Fill in the details.  | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | thin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm   | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper             | ty                       | uptcy.  Date payment or transfer          | Amount of          |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys or plude any attorneys, bankruptcy or plude any attorneys or plude any attor | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys or plude any attorneys, bankruptcy or plude any attorneys or plude any attor | for bankruptcy, did y<br>preparing a bankrup  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy | for bankruptcy, did y preparing a bankruptcy petition preparers, o  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State   | for bankruptcy, did y preparing a bankruptcy petition preparers, o  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy | for bankruptcy, did y preparing a bankruptcy petition preparers, o  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address   | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys any attorneys or plude any attorneys any attorneys or plude any attorneys any attorneys any attorneys or plude any attorneys any attorneys or plude any attorneys any attorneys any attorneys or plude any attorneys, bankruptcy or plude any attorneys or plude any attorneys, bankruptcy or plude | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys any attorneys or plude any attorneys any attorneys or plude any attorneys any attorneys any attorneys or plude any attorneys any attorneys or plude any attorneys any attorneys any attorneys or plude any attorneys, bankruptcy or plude any attorneys or plude any attorneys, bankruptcy or plude | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or person Who Was Paid Number Street   | for bankruptcy, did y preparing a bankruptcy petition preparers, of the preparers of the pr          | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptch No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  | for bankruptcy, did y<br>preparing a bankrup<br>by petition preparers, o<br>control of the control of the | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys or person Who Was Paid Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street  City State   | for bankruptcy, did y preparing a bankruptcy petition preparers, of the preparers of the pr          | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or person Who Was Paid Number Street   | for bankruptcy, did y preparing a bankruptcy petition preparers, of the preparers of the pr          | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |
| Wit      | chin 1 year before you filed but seeking bankruptcy or plude any attorneys, bankruptcy or plude any attorneys or person Who Was Paid Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street  City State   | for bankruptcy, did y preparing a bankruptcy petition preparers, of 60643 Zip Code  Zip Code  | tcy petition? r credit counseling agencies for services req  Description and value of any proper transferred | ty                       | uptcy.  Date payment or transfer was made | Amount of payment  |

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| ebtor 1  | Antonio   |                          | Belk  | Case number (if known)            |  |                              |
|----------|---|--------------------------|---|-----------------------------------|--|------------------------------|
|          | First Name  | Middle Name              | Last Name   |                                   |  |                              |
| hel      |   | reditors or to make pa   | d you or anyone else acting on<br>yments to your creditors?<br>ed on line 16. | your behalf pay or transfer ar    | ny property to anyone                          | e who promised t             |
| <b>✓</b> | No<br>Yes. Fill in the details.                                   |                          |   |                                   |  |                              |
|          |   |                          | Description and value or transferred  | 1                                 | Date Amo<br>payment or<br>transfer was<br>made | ount of payment              |
|          | Person Who Was Paid   |                          | _   | -                                 |  |                              |
|          | Number Street   |                          | _   |                                   |  |                              |
|          | City Sta  | ate Zip Code             | _   |                                   |  |                              |
| Inc      | I transfers that you have   | ers and transfers made a | as security (such as the granting o   | f a security interest or mortgage | on your property). Do                          | not include gifts            |
| Ш        | Yes. Fill in the details.   |                          | Description and value or transferred  |                                   | property or<br>vived or debts paid             | Date<br>transfer was<br>made |
|          | Person Who Received   | Transfer                 | _   |                                   |  |                              |
|          | Number Street   |                          | _   |                                   |  |                              |
|          | City Sta<br>Person's relationship to                              | '                        | _   |                                   |  |                              |
|          | Person Who Received   | Transfer                 | _   |                                   |  |                              |
|          | Number Street   |                          | _   |                                   |  |                              |
|          | City Sta<br>Person's relationship to                              | '                        | _   |                                   |  |                              |
| ber      | hin 10 years before yo<br>neficiary?<br>ese are often called asse |                          | did you transfer any property t   | o a self-settled trust or simila  | r device of which you                          | u are a                      |
| <b>✓</b> | No<br>Yes. Fill in the details.                                   |                          |   |                                   |  |                              |
|          |   |                          | Description and value   | of the property transferred       |  | Date<br>transfer was<br>made |
|          | Name of trust   |                          |   |                                   |  |                              |

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Belk Debtor 1 Antonio Case number (if known) First Name Middle Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Antonio Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb  |          | Antonio                    |                 |                   | Belk                               |           | Ca              | se number <i>(i</i>       | f known)                     |              |                    |
|------|----------|----------------------------|-----------------|-------------------|------------------------------------|-----------|-----------------|---------------------------|------------------------------|--------------|--------------------|
|      |          | First Name                 |                 | Middle Name       | Last Nam                           | ie        |                 |                           |                              |              |                    |
| 26.  |          | e you been a party         | y in any judici | al or administr   | ative proceeding                   | g under   | any environme   | ental law? Ir             | nclude settlemen             | ts and order | rs.                |
|      |          | No<br>Yes. Fill in the det | ails.           |                   |                                    |           |                 |                           |                              |              |                    |
|      |          |                            |                 |                   | Court or agency                    |           |                 | Nature                    | of the case                  |              | Status of the case |
|      |          | Case title                 |                 |                   | Court Name                         |           |                 |                           |                              |              | Pending            |
|      |          | Case number                |                 |                   | NumberStreet                       |           |                 |                           |                              |              | On appeal          |
|      |          |                            |                 |                   | City S                             | tate      | Zip Code        |                           |                              |              | Concluded          |
| Pari | t 11:    | Give Details Ab            | oout Your B     | usiness or Co     | onnections to A                    | Any Bu    | siness          |                           |                              |              |                    |
| 27.  | Witl     | nin 4 years before         | you filed for b | ankruptcy, did    | l you own a busir                  | ness or   | have any of the | e following o             | connections to ar            | ny business? | •                  |
|      |          |                            |                 |                   | ade, profession, o                 |           | -               |                           | part-time                    |              |                    |
|      |          | A member of A partner in a |                 | lity company (L   | LC) or limited lial                | bility pa | rtnership (LLP) |                           |                              |              |                    |
|      |          |                            |                 | aging executiv    | e of a corporation                 | on        |                 |                           |                              |              |                    |
|      |          | An owner of                | at least 5% of  | the voting or e   | quity securities o                 | of a corp | ooration        |                           |                              |              |                    |
|      | <b>✓</b> | No. None of the a          |                 |                   |                                    |           |                 |                           |                              |              |                    |
|      |          | Yes. Check all that        | at apply abov   | e and fill in the |                                    |           |                 |                           |                              |              |                    |
|      |          |                            |                 |                   | Describe the nature of the busines |           | less            | include Social Security n |                              |              |                    |
|      |          | Business Name              |                 |                   | _                                  |           |                 |                           | EIN:                         |              |                    |
|      |          | Number Street              |                 |                   | Name of a                          | ccounta   | ant or bookkee  | per                       | Dates busines                | s existed    |                    |
|      |          | City                       | State           | Zip Code          |                                    |           |                 |                           | From                         | To           |                    |
|      |          |                            |                 |                   |                                    |           |                 |                           |                              |              |                    |
|      |          |                            |                 |                   | Describe t                         | he natu   | re of the busin | ess                       | Employer Iden include Social |              |                    |
|      |          | Business Name              |                 |                   | _                                  |           |                 |                           | EIN:                         |              |                    |
|      |          | Number Street              |                 |                   | _                                  |           |                 |                           | Dates busines                | s existed    |                    |
|      |          | City                       | State           | Zip Code          | Name of a                          | ccounta   | ant or bookkee  | per                       | From                         | То           |                    |
|      |          |                            |                 |                   |                                    |           |                 |                           |                              |              |                    |
|      |          |                            |                 |                   |                                    |           |                 |                           |                              |              |                    |
|      |          |                            |                 |                   | Describe t                         | he natu   | re of the busin | ess                       | Employer Iden include Social |              |                    |
|      |          | Business Name              |                 |                   | _                                  |           |                 |                           | EIN:                         |              |                    |
|      |          | Number Street              |                 |                   | Name of a                          | ccounts   | ant or bookkee  | per                       | Dates busines                | s existed    |                    |
|      |          | City                       | State           | Zip Code          | _                                  |           |                 |                           | From                         | To           |                    |
|      |          |                            |                 |                   |                                    |           |                 |                           |                              |              |                    |

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| Deb  | tor 1           | Antonio                                   |                 |   | Belk   | Case number (if known)   |
|------|-----------------|---|-----------------|---|--|--|
|      |                 | First Name                                |                 | Middle Name                                     | Last Name  |  |
| 28.  | cred            | nin 2 years bef<br>ditors, or other<br>No | -               | r bankruptcy, did yo                            | u give a financial statemen                                | t to anyone about your business? Include all financial institutions,   |
|      | П               | Yes. Fill in the                          | details below.  |   |  |  |
|      | _               |   |                 |   | Date issued  |  |
|      |                 |   |                 |   | Date Issued  |  |
|      |                 | Name                                      |                 |   | MM/DD/YYYY   |  |
|      |                 |   |                 |   |  |  |
|      |                 | Number Stre                               | eet             |   |  |  |
|      |                 | City                                      | State           | Zip Code  | •  |  |
|      |                 | City                                      | State           | Zip Code  |  |  |
| Part | t 12:           | Sign Below                                |                 |   |  |  |
| 1    | true a          | ınd correct. I u                          | ınderstand tha  | t making a false stat<br>ies up to \$250,000, o | ement, concealing property<br>or imprisonment for up to 20 | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |                 | Sig                                       | nature of Debto | r 1   |  | Signature of Debtor 2  |
|      |                 | Da  | te 4/2/2018     |   |  | Date   |
| I    | Did yo          | lo<br>es<br>ou pay or agree               | e to pay somed  |   | Financial Affairs for Individu                             |  |
|      | $\bigsqcup^{Y}$ | es. Name of pe                            | rson            |   |  | Attach the Bankruptcy Petition Preparer's Notice,  |

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| Fill in this information to identify your case: |            |             |                      |  |  |
|---|------------|-------------|----------------------|--|--|
| Debtor 1  | Antonio    | Belk        |                      |  |  |
|   | First Name | Middle Name | Last Name            |  |  |
| Debtor 2  |            |             |                      |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name            |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois |  |  |
|   |            |             | (State)              |  |  |
| Case number<br>(If known)                       |            |             |                      |  |  |

| Check if this | is an  |
|---------------|--------|
| amended       | filina |

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

| 1. |  | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. |  |   |  |  |  |  |  |  |
|----|--|---|--|---|--|--|--|--|--|--|
|    | Identify the cred  | ditor and the property that is collateral   | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |  |  |  |  |  |  |
|    | Creditor's<br>name: BK OF AN<br>Description of<br>property<br>securing debt:<br>\$244,463.00 | MER<br>5526 W 63rd Pl, Chicago, IL 60638   Value:   | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and  | No.<br>✓ Yes.                                       |  |  |  |  |  |  |
|    | Creditor's<br>name: MAFCU<br>Description of<br>property<br>securing debt:                    | Jeep Cherokee   | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:   | ✓ No.<br>Yes.                                       |  |  |  |  |  |  |
|    | Creditor's<br>name: CAP1/HLZ<br>Description of<br>property<br>securing debt:                 | ZBG<br>CreditCard   | <ul> <li>Surrender the property.</li> <li>Retain the property and redeem it.</li> <li>✓ Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | No.<br>✓ Yes.                                       |  |  |  |  |  |  |
|    | Creditor's<br>name: COMENIT<br>Description of<br>property<br>securing debt:                  | YCB/ZALES  CreditCard   | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and  | No.<br>✓ Yes.                                       |  |  |  |  |  |  |

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| Liet Vour Unovoire       | d Darsonal Droparty Lase        | 200                    |  |
|--------------------------|---------------------------------|------------------------|--|
| _                        | d Personal Property Leas        |                        | 0  |
|                          |                                 |                        | Contracts and Unexpired Leases (Official Form 106G), fill in the<br>are still in effect; the lease period has not yet ended. You may |
|                          | I property lease if the trustee |                        |  |
|                          |                                 |                        |  |
| escribe your unexpired   | personal property leases        |                        | Will the lease be assumed?   |
|                          |                                 |                        | □No  |
| essor's name:            |                                 |                        | Yes  |
| escription of leased     |                                 |                        | <b>_</b>   |
| operty:                  |                                 |                        |  |
|                          |                                 |                        |  |
| essor's name:            |                                 |                        | No   |
|                          |                                 |                        | Yes  |
| escription of leased     |                                 |                        |  |
| operty:                  |                                 |                        |  |
|                          |                                 |                        | □ No   |
| ssor's name:             |                                 |                        | Yes  |
| escription of leased     |                                 |                        |  |
| operty:                  |                                 |                        |  |
|                          |                                 |                        |  |
| ssor's name:             |                                 |                        | No   |
|                          |                                 |                        | Yes  |
| escription of leased     |                                 |                        |  |
| operty:                  |                                 |                        |  |
|                          |                                 |                        | □ No   |
| essor's name:            |                                 |                        | Yes  |
| escription of leased     |                                 |                        | <b>—</b>   |
| operty:                  |                                 |                        |  |
|                          |                                 |                        |  |
| essor's name:            |                                 |                        | No   |
|                          |                                 |                        | Yes  |
| escription of leased     |                                 |                        |  |
| operty:                  |                                 |                        |  |
| poorlo nomo:             |                                 |                        | ☐ No   |
| ssor's name:             |                                 |                        | Yes  |
| escription of leased     |                                 |                        | _  |
| operty:                  |                                 |                        |  |
| _                        |                                 |                        |  |
| Sign Below               |                                 |                        |  |
| ler penalty of periury 1 | declare that I have indicated   | my intention about any | property of my estate that secures a debt and any personal   |
| perty that is subject to |                                 | ,c about ally          | , c, coluit cocaroo a acot and any personal  |
|                          |                                 |                        |  |
| /s/ Antonio Belk         |                                 | _                      |  |
| Signature of Debtor 1    |                                 | Sig                    | nature of Debtor 2   |

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

| Northern District of Illinois   |                              |  |  |  |  |  |  |
|---|------------------------------|--|--|--|--|--|--|
| n re Antonio Belk Case No.  |                              |  |  |  |  |  |  |
| Debtor  | (If known)                   |  |  |  |  |  |  |
| Chapter   | Chapter 7                    |  |  |  |  |  |  |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR  | R DEBTOR                     |  |  |  |  |  |  |
| <ol> <li>Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovene<br/>compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be<br/>rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bank</li> </ol> | paid to me, for services     |  |  |  |  |  |  |
| For legal services, I have agreed to accept   | \$1,765.00                   |  |  |  |  |  |  |
| Prior to the filing of this statement I have received   | \$0.00                       |  |  |  |  |  |  |
| Balance Due   | \$1,765.00                   |  |  |  |  |  |  |
| 2. The source of the compensation paid to me was:   |                              |  |  |  |  |  |  |
| Debtor Other (specify)  |                              |  |  |  |  |  |  |
| 3. The source of the compensation paid to me is:  |                              |  |  |  |  |  |  |
| Debtor Other (specify)  |                              |  |  |  |  |  |  |
| I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  |                              |  |  |  |  |  |  |
| I have agreed to share the above-disclosed compensation with a other person or persons who are n members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.   |                              |  |  |  |  |  |  |
| 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankrupt   | cy case, including:          |  |  |  |  |  |  |
| <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining wh<br/>bankruptcy;</li> </ul>   | nether to file a petition in |  |  |  |  |  |  |
| b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be red   | quired;                      |  |  |  |  |  |  |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjou   | urned hearings thereof;      |  |  |  |  |  |  |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  |                              |  |  |  |  |  |  |
|   |                              |  |  |  |  |  |  |
| CERTIFICATION   |                              |  |  |  |  |  |  |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me fo debtor(s) in this bankruptcy proceedings.   | r representation of the      |  |  |  |  |  |  |
| 4/2/2018 /s/ Alexander Preber   |                              |  |  |  |  |  |  |
| Date Signature of Attorney  |                              |  |  |  |  |  |  |
| Semrad Law Firm   |                              |  |  |  |  |  |  |
| Name of law firm  |                              |  |  |  |  |  |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Belk, Antonio | Case No   |                                     |
|-----------------|---------------|---|-------------------------------------|
|                 | Debtor(s)     | 0000 110.                                       |                                     |
|                 |               | Chapter.  | Chapter7                            |
|                 | VERIF         | CONTRACTOR OF CREDITOR MATE                     | RIX                                 |
| Th<br>knowledge |               | rify that the attached list of creditors is tru | ue and correct to the best of their |
| Date:           | 4/2/2018      | /s/ Belk, Antonio                               |                                     |
|                 |               | Belk, Antonio<br>Signature of Debt              | tor                                 |

BK OF AMER 4909 SAVARESE CIRCLE FL1-908-01-47 TAMPA, FL, 33634

MAFCU 17 FIRSTFIELD RD GAITHERSBURG, MD, 20898

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

SYNCB/ART VAN FURNITUR 950 FORRER BLVD KETTERING, OH, 45420

COMENITYCB/HSN 995 W 122ND AVE WESTMINSTER, CO, 80234

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV, 89193

CAP1/HLZBG PO BOX 5253 CAROL STREAM, IL, 60197

COMENITYCB/ZALES PO BOX 182120 COLUMBUS, OH, 43218

NELNET LOANS 6420 SOUTHPOINT PKWY JACKSONVILLE, FL, 32216

SYNCB/QVC PO BOX 965005 ORLANDO, FL, 32896 CCS/FIRST NATIONAL BAN 500 E 60TH ST N SIOUX FALLS, SD, 57104

TRUST REC SV 541 OTIS BOWEN DRIVE MUNSTER, IN, 46321

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

DOUGLAS W. SMITH - Attorney At Law 2021 Midwest Rd Suite 200 Oak Brook, IL, 60523

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1765.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information

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necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 04/02/2018

Client

Client

Attorney

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| Debtor 1   | Antonio   |  | Belk                       | Case number (if known)   | )                                       |      |
|------------|-----------|--|----------------------------|--|---|------|
|            | First Nam | e Middle Name  | Last Name                  |  |   |      |
| 41.        | 41a.      | Fill in the amount of your total nonprion Your Assets and Liabilities and Certain States you may refer to line 3b on that form |                            |  |   |      |
|            |           |  |                            |  | x .25                                   |      |
|            | 41b.      | 25% of your total nonpriority unsecure<br>Multiply line 41a by 0.25  | ed debt. 11 U.S.C. § 707   | (b)(2)(A)(i)(l).   | Copy<br>here →                          |      |
| 42.        | is eno    | nine whether the income you have left ough to pay 25% of your unsecured, nong the box that applies:                            |                            | II allowed deductions  |   |      |
|            |           | ne <b>39d is less than line 41b.</b> On the top of to Part 5.  | of page 1 of this form, ch | eck box 1, There is no presumption   | on of abuse.                            |      |
|            |           | ne <b>39d is equal to or more than line 41b</b><br>abuse. You may fill out Part 4 if you claim                                 |                            |  | a presumption                           |      |
| Part 4:    | Give D    | etails About Special Circumstance  | es                         |  |   |      |
|            |           | any special circumstances that justify a<br>Iternative? 11 U.S.C. § 707(b)(2)(B).  | additional expenses or a   | djustments of current monthly  | income for which there i                | s no |
| <b>☑</b> 1 | No. Go to | o Part 5.  |                            |  | : · · · · · · · · · · · · · · · · · · · |      |
|            |           | n the following information. All figures shou<br>ach item. You may include expenses you li                                     |                            | onthly expense or income adjustm   | ent                                     |      |
|            | adjus     | must give a detailed explanation of the spe<br>stments necessary and reasonable. You mu<br>al expenses or income adjustments.  |                            | The state of the s |   |      |
|            | Give      | a detailed explanation of the special c  | ircumstances               |  | age monthly expense<br>come adjustment  |      |
|            |           |  |                            |  |   |      |
| Part 5:    | Sign B    | elow   |                            |  |   |      |
|            | By sig    | gning here, I declare under Penalty of perju   | ry that the information on | this statement and in any attachn  | nents is true and correct.              |      |
|            | ×         | /s/ Antonio Belk   | // s                       | ξ  |   |      |
|            | 5         | Signature of Debtor 1  |                            | Signature of Debtor 2  |   |      |
|            |           | Date 4/2/2018 / MM/DD/YYYYY  |                            | Date MM/DD/YYYY  |   |      |

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| Debtor <sup>-</sup>  | Antonio   |   | Belk                         | Case number                 | (if known)     |  |             |                              |
|----------------------|---|---|------------------------------|-----------------------------|----------------|--|-------------|------------------------------|
|                      | First Name  | Middle Name   | Last Name                    |                             |                |  |             |                              |
|                      |   |   |                              | Column A<br><b>Debtor 1</b> |                | Column B Debtor 2 or non-filing spous  | se          |                              |
| 8.Uner               | nployment compensation  | on  |                              | \$0.00                      |                |  |             |                              |
| Do n                 | ot enter the amount if your the Social Security Act.  | u contend that the amou   | ınt received was a benefit   |                             |                | 0  | <del></del> |                              |
|                      | ou  |   | \$0.00                       |                             |                |  |             |                              |
| 1.00                 | our spouse  |   | \$0.00                       |                             |                |  |             |                              |
|                      | our spouse  |   | Ψ0.00                        |                             |                |  |             |                              |
|                      | sion or retirement incor<br>fit under the Social Secur  |   | amount received that was a   | \$0.00                      |                |  |             |                              |
| amo<br>payn<br>inter | ome from all other sour<br>unt. Do not include any be<br>nents received as a victim<br>national or domestic terro<br>and put the total below. | penefits received under the<br>of a war crime, a crime a<br>rism. If necessary, list ot | e Social Security Act or     |                             |                |  |             |                              |
| -                    |   |   |                              |                             |                |  |             |                              |
| Tota                 | amounts from separate   | pages, if any.  |                              | +\$0.00                     |                | +  |             |                              |
|                      | ,   |   |                              |                             | 7              |  |             |                              |
| 11. Ca               | lculate your total curre  | ent monthly income. Ad  | d lines 2 through 10 for     | \$7,321.99                  | +              |  | =           | \$7,321.99                   |
| each                 | lumn. Then add the total  | for Column A to the total   | ol for Column B              | 47,021.00                   |                | 51   | -           |                              |
| CO                   | iumm. Then add the total  | ior Column A to the tota  | arior Columni B.             |                             | J !            | ,  |             |                              |
|                      |   |   |                              |                             |                |  |             | Total current monthly income |
| Part 2:              | Determine Whethe  | r the Means Test Ar   | online to Vou                |                             |                |  |             | monthly moonle               |
|                      |   |   | •                            |                             |                |  |             |                              |
|                      | culate your current mon<br>Copy your total current r  |   | 22                           |                             | 0              | - 44 h   |             | 1                            |
| 12a.                 | Copy your total current i   | nonting income nom line   | <b>3   1   .</b>             |                             | Copy line      | e 11 here →  |             | \$7,321.99                   |
|                      | Multiply by 12 (the num   | ber of months in a year)  |                              |                             |                |  |             | X 12                         |
| 12b.                 | The result is your annua  | I income for this part of t   | he form.                     |                             |                |  | 12b.        | \$87,863.88                  |
|                      |   |   |                              | w.                          |                |  |             |                              |
| 13 Calc              | ulate the median famil  | y income that applies   | to you. Follow these steps:  |                             |                |  |             |                              |
| =111.1               |   |   | Illinois                     |                             |                |  |             |                              |
| FIII Ir              | the state in which you li   | ve.   |                              | and the second              |                | 15   |             |                              |
| Fill in              | the number of people in   | your household.   | 3                            |                             |                |  |             |                              |
|                      | n the median family inconsehold.  | ne for your state and size  | e of                         |                             | ************** | scorena de la composition della composition dell | 13.         | \$80,233.00                  |
|                      |   | dian income amounts, q  | o online using the link spec | cified in the separate      |                |  |             |                              |
|                      |   |   | le at the bankruptcy clerk's |                             |                |  |             | *                            |
| 14. Hov              | v do the lines compare  | ?   |                              |                             |                |  |             |                              |
| 14a.                 | Line 12b is less than Go to Part 3.   | n or equal to line 13. On   | the top of page 1, check b   | oox 1, There is no presump  | tion of ab     | ouse.  |             |                              |
| 14b.                 | Line 12b is more th   | an line 13. On the top o  | f page 1, check box 2, The   | presumption of abuse is d   | etermined      | d by Form 122A-  | 2.          |                              |
| Part 3:              | I   |   |                              |                             |                |  |             |                              |
| 1000                 |   |   |                              |                             |                |  |             |                              |
| Ву                   | signing here, I declare un  | der penalty of perjury the  | at the information on this s | tatement and in any attach  | ments is t     | rue and correct.   |             |                              |
|                      | /   |   |                              |                             |                |  |             |                              |
| ×                    | /s/ Antonio Belk  | 101/  |                              | ×                           |                |  |             |                              |
| 100                  | Signature of Debtor 1   | O W   |                              |                             |                |  |             |                              |
|                      | oignature of Debloy 1   |   |                              | Signature of Debtor 2       |                |  |             |                              |
|                      | Date 4/2/2018 (   | VX  |                              | Date 4/2/2018               |                |  |             |                              |
|                      | MM/DD/YYYY  | 1/  |                              | MM/DD/YYYY                  |                |  |             |                              |
|                      |   | 4   |                              |                             |                |  |             |                              |
|                      | f you checked line 14a, d<br>f you checked line 14b, fi   |   |                              |                             |                |  |             |                              |

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:         | Belk, Antonio  Debtor(s) | Case No  |                                    |
|----------------|--------------------------|--|------------------------------------|
|                |                          | Chapter.   | Chapter7                           |
|                | VERIFI                   | CATION OF CREDITOR MATE                                    | RIX                                |
| Th<br>nowledge |                          | y that the attached list of creditors is tru               | e and correct to the best of their |
| )ate:          | 4/2/2018                 | /s/ Belk, Antonio/<br>Belk, Antonio/<br>Signature of Debte | oy O                               |

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| otor                                    | Antonio   |   | Belk   | Case number (if  |
|---|---|---|--|--|
|   | First Name  | Middle Name   | Last Name  | known)   |
| 2:                                      | List Your Unexpire                                  | d Personal Property Leas  | es   |  |
|   |   |   |  | Contracts and Unexpired Leases (Official Form 106G), fill in the |
| mat                                     | tion below. Do not list                             |   | leases are leases that   | are still in effect; the lease period has not yet ended. You may |
| iiie                                    | an unexpired persona                                | ii property lease ii tile trustee   | does not assume it. 11   | J.S.C. § 365(p)(2).  |
| Des                                     | scribe your unexpired                               | personal property leases  |  | Will the lease be assumed?                                       |
|   |   |   |  |  |
| Les                                     | sor's name:   |   |  | No   |
| Name and Address                        |   |   |  | Yes  |
|   | cription of leased<br>perty:                        |   |  |  |
| Piot                                    | ocity.  |   |  |  |
| Les                                     | sor's name:   |   |  | No   |
|   |   |   |  | Yes  |
|   | cription of leased                                  |   |  |  |
| prop                                    | perty:  |   |  |  |
| 1 -                                     | aarla nan   |   | dagan kanan dagan dagan pinan intu dagan kewasan yang anarah in melalah dagan dagan dagan dagan dagan dagan da   | ∏ No   |
| Les                                     | sor's name:   |   |  | Yes  |
| Des                                     | cription of leased                                  |   |  | _  |
| pro                                     | perty:  |   |  |  |
|   |   |   |  | ☐ No   |
| Les                                     | sor's name:   |   |  | ☐ Yes  |
| Dae                                     | cription of leased                                  |   |  |  |
|   | perty:  | 6   |  |  |
| \$100.00 m                              |   |   |  | · No   |
| Les                                     | sor's name:   |   |  | No ☐ Yes   |
| Dan                                     | eviation of logged                                  | The same was the same that the same same and the same same same same same same same sam | THE RESERVE OF THE PARTY OF THE | Too I too  |
|   | scription of leased perty:                          |   |  |  |
|   |   |   |  |  |
| Les                                     | sor's name:   |   |  | No Vos   |
|   |   |   |  | Yes  |
|   | scription of leased<br>perty:                       |   |  |  |
| *************************************** |   |   |  |  |
| Les                                     | sor's name:   |   |  | No   |
| -                                       |   |   |  | Yes  |
|   | scription of leased                                 |   |  |  |
| μω                                      | perty:  |   |  |  |
| 3.                                      | Sign Below  | _ /   | 1  |  |
|   |   |   | 3  |  |
| Inde<br>ron                             | er penalty of perjury, I<br>erty that is subject to | declare/that //have indicated an unexpired lease.                                       | my intention about any   | property of my estate that secures a debt and any personal       |
| . Jp                                    |   | 11/   |  |  |
| <b>C</b>                                | /s/ Antonio Belk                                    | 11/   |  |  |
| _                                       | ignature of Debtor 1                                | 11/1///   | Sig  | nature of Debtor 2   |
| D                                       | ate 4/2/2018  |   | Da   | e  |
| ال                                      | MM/DD/YYYY  | v /   | Da   | MM/DD/YYYY   |

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| Debtor     | 1 Antonio   |                          | Belk  | Case number (if known)   |
|------------|---|--------------------------|---|--|
|            | First Name  | Middle Name              | Last Name   |  |
|            | Vithin 2 years before you<br>reditors, or other parties |                          | ou give a financial state                         | ment to anyone about your business? Include all financial institutions,  |
| Г          | ☑ No  |                          |   |  |
|            | Yes. Fill in the details                                | below.                   |   |  |
|            |   |                          | Date issued                                       | *  |
|            | Name  |                          | MM/DD/YYYY  | <u> </u>   |
|            | Number Street   |                          | _   |  |
|            |   |                          |   |  |
|            | City  | tate Zip Code            | _   |  |
| Part 12    | 2: Sign Below   |                          |   |  |
| tru<br>a b | /s/ Anto  | onio Belk of Debtor 1    | atement, concealing pro<br>or imprisonment for up | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date |
|            | Date 4/2/   | 2018                     |   |  |
| Did        | d you attach additional p                               | ages to Your Statement o | f Financial Affairs for Inc                       | lividuals Filing for Bankruptcy (Official Form 107)?   |
| ✓          | No<br>Yes   |                          |   |  |
| Did        | d you pay or agree to pay                               | someone who is not an a  | ttorney to help you fill o                        | ut bankruptcy forms?   |
| V          | No  |                          |   |  |
|            | Yes. Name of person                                     |                          |   | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  |

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|                                 |                          | ۵,                           | ocament rag                    | JC 72 01 70  |                                    |  |  |
|---------------------------------|--------------------------|------------------------------|--------------------------------|--|------------------------------------|--|--|
| Fill in this infor              | mation to identify your  | case:                        | PROVINCE OF THE REAL PROPERTY. |  |                                    |  |  |
| Debtor 1                        | Antonio                  |                              | Belk                           |  |                                    |  |  |
| 1                               | First Name               | Middle Name                  | Last Name                      | ,  |                                    |  |  |
| Debtor 2<br>(Spouse, if filing) | First Name               | Middle Name                  | Last Name                      |  |                                    |  |  |
| United States E                 | Bankruptcy Court for the | : Northern                   | District of Illinois           |  |                                    |  |  |
|                                 |                          |                              | (State)                        |  |                                    |  |  |
| Case number                     |                          |                              |                                | —— İ   |                                    |  |  |
| Official                        | Form 106D                | ec                           |                                |  | Check if this is an amended filing |  |  |
| Declarat                        | ion About an             | Individual Debt              | or's Schedule                  | S  | 12/15                              |  |  |
| If two married                  | people are filing toget  | her, both are equally respor | nsible for supplying corr      | ect information.   |                                    |  |  |
| money or prop                   |                          | ction with a bankruptcy case |                                | Making a false statement, conceal<br>to \$250,000, or imprisonment for u |                                    |  |  |
| Part 1: Sign Below              |                          |                              |                                |  |                                    |  |  |
| Did you p                       | ay or agree to pay son   | neone who is NOT an attorn   | ey to help you fill out ba     | nkruptcy forms?  |                                    |  |  |
| <b>✓</b> No                     |                          |                              |                                |  |                                    |  |  |
| ☐ Yes.                          | Name of person           |                              | Attach Bankrupto               | y Petition Preparer's Notice, Declaratio                                 | on, and                            |  |  |

Signature (Official Form 119).

Signature of Debtor 2

Date

MM/DD/YYYY

Date 4/2/2018

MM/DD/YYYY

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| Debtor 1 Antonio First Name  | Middle Name  | Belk   | _ Case number (if known) _  |   |  |  |
|--|--|--|---|---|--|--|
|  | Middle Name  | Last Name  |   |   |  |  |
| Part 6: Answer These Que   | estions for Reporting Purpose  |  |   |   |  |  |
| 16. What kind of debts do<br>you have?   | 16a. Are your debts primarily "incurred by an individua  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily money for a business or  No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you   | al primarily for a person<br>y business debts? <i>Bu</i><br>investment or through  | nal, family, or household<br>siness debts are debts to<br>the operation of the bu   | d purpose."<br>hat you incurred to obtain<br>usiness or investment.   |  |  |
| 17. Are you filing under   | No. I am not filing under Cha  | anter 7 Go to line 18  |   |   |  |  |
| Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under Chapte  | er 7. Do you estimate tha  | t after any exempt proper<br>o distribute to unsecured o  | ty is excluded and administrative creditors?  |  |  |
| 18. How many creditors   | 1-49   | 1,000-5,00   |   | 25,001-50,000   |  |  |
| do you estimate that you owe?  | 50-99<br>100-199<br>200-999  | 5,001-10,0<br>10,001-25  |   | 50,001-100,000  More than 100,000   |  |  |
| 19. How much do you estimate your assets to be worth?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10,000,0<br>\$50,000,0   | 1-\$10 million<br>01-\$50 million<br>01-\$100 million<br>001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |
| <sup>20</sup> · How much do you<br>estimate your<br>liabilities to be?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10,000,0<br>\$50,000,0   | 1-\$10 million<br>01-\$50 million<br>01-\$100 million<br>001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |
| Part 7: Sign Below   | Ÿ  |  |   |   |  |  |
| For you  | correct.  If I have chosen to file under C of title 11, United States Code under Chapter 7.  If no attorney represents me are out this document, I have obtained in accordance via the content of the con | Chapter 7, I am aware to a lunderstand the relied of a longer and I did not pay or agrained and read the not with the chapter of title | hat I may proceed, if elige<br>ef available under each of<br>ee to pay someone who<br>ice required by 11 U.S.O<br>e 11, United States Cod | e, specified in this petition.  |  |  |
|  | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§7152, 1341, 1519, and 3571.   |  |   |   |  |  |
|  | /s/ Antonio Belk/<br>Signature of Deptor 1   |  | Signature of Deb  | otor 2  |  |  |
|  | Executed on 4/2/2018   | 1  | Executed on   |   |  |  |
|  | MM / D   | D/YYYY   |   | MM / DD / YYYY  |  |  |